

Insurance Premium Refund Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

[Insurance Company Name]

[Company Address]

[City, State, ZIP Code]

Dear [Insurance Company Name],

I am writing to formally request a refund of my insurance premium, as I have recently closed my account with your company. My policy number is [Insert Policy Number].

Due to [brief explanation of the reason for account closure], I would appreciate your assistance in processing my refund at your earliest convenience. I believe that there are unutilized premium amounts due to the closure of my policy.

Please let me know if you require any additional information to expedite this process. I can be reached at [Phone Number] or [Email Address].

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]