

Insurance Premium Refund Request

To,
The Claims Department,
[Insurance Company Name]
[Company Address]
[City, State, ZIP Code]

Date: [Insert Date]

Subject: Request for Refund of Insurance Premium on Joint Policy

Dear [Insurance Company Name] Team,

I hope this message finds you well. I am writing to request a refund for the premium paid for our joint insurance policy, policy number [Insert Policy Number]. The policy is held under the names of [Your Name] and [Co-Policyholder's Name].

Due to [briefly explain the reason for your refund request, e.g., cancellation of the policy, overpayment, etc.], we kindly request that you process our refund at your earliest convenience.

Please find attached [any relevant documents, if necessary]. We appreciate your prompt attention to this matter and look forward to your response.

Thank you for your cooperation.

Sincerely,
[Your Name]
[Co-Policyholder's Name]
[Your Address]
[City, State, ZIP Code]
[Your Email]
[Your Phone Number]