Travel Insurance Coverage Extension Notice

Date: [Insert Date] To: [Insured Party's Name] Address: [Insured Party's Address] Dear [Insured Party's Name], We hope this message finds you well. We are writing to inform you that your travel insurance coverage, under policy number [Insert Policy Number], is set to expire on [Insert Expiration Date1. In order to continue your coverage beyond this date, we are pleased to offer you an extension of your policy. The new expiration date will be [Insert New Expiration Date]. This extension ensures that you remain protected during your travels, providing you with peace of mind. Details of the extension: • Policy Number: [Insert Policy Number] • Coverage Period: [Insert Start Date] to [Insert New Expiration Date] Premium Amount: [Insert Premium Amount] Please review the terms of your extended coverage and confirm your acceptance by [Insert Deadline for Response]. If you have any questions or require further assistance, do not hesitate to contact our support team at [Insert Contact Information]. Thank you for choosing [Insurance Company Name]. We wish you safe and enjoyable travels. Sincerely, [Your Name] [Your Title] [Company Name]

[Company Contact Information]