

# Inquiry Regarding Critical Illness Coverage Options

Your Name

Your Address

City, State, Zip Code

Email Address

Phone Number

Date

Insurance Company Name

Company Address

City, State, Zip Code

Dear [Insurance Agent's Name or Customer Service],

I hope this message finds you well. I am writing to inquire about the critical illness coverage options available through your company. As I consider my insurance needs, I would greatly appreciate any information you could provide regarding the types of coverage you offer, including the scope of benefits, eligibility criteria, and application process.

Additionally, if you could provide details on the premiums associated with your critical illness policies and any available riders, that would be incredibly helpful.

Thank you for your time and assistance. I look forward to your prompt response so that I can make an informed decision regarding my coverage options.

Sincerely,

[Your Name]