

# Insurance Rate Comparison Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Your Email]

[Your Phone Number]

[Recipient's Name]

[Insurance Company Name]

[Company Address]

[City, State, ZIP Code]

Dear [Recipient's Name],

I am writing to formally request a comparison of my current insurance rates with other options available in the market. As a long-standing customer of [Insurance Company Name], I value your services and wish to ensure that I am receiving the best possible rates.

Currently, my policy number is [Policy Number], and I would appreciate your assistance in providing a detailed breakdown of my current premiums in comparison to similar policies offered by competing companies.

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

Sincerely,

[Your Name]