

Letter of Dissatisfaction

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

To: [Insurance Company's Name]

[Agent's Name]

[Company Address]

[City, State, Zip Code]

Dear [Agent's Name],

I am writing to express my dissatisfaction with the communication I have received from you regarding my insurance policy. Over the past [duration], I have encountered numerous delays and a lack of clarity in our correspondence. This has caused significant frustration and has impacted my overall confidence in your services.

Specifically, I have noted the following issues:

1. [Detail Issue #1]
2. [Detail Issue #2]
3. [Detail Issue #3]

I believe clear and timely communication is essential in addressing my insurance needs, and I urge you to improve in this area. I would appreciate a prompt response to my concerns and a clear outline of the next steps moving forward.

Thank you for your attention to this matter. I look forward to your swift reply.

Sincerely,

[Your Name]