

Duplicate Coverage Refund Request

Date: [Insert Date]

To:

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Insurance Company Customer Service/Claims Department],

I am writing to formally request a refund for duplicate coverage I purchased related to my travel insurance policy.

Details of my policy are as follows:

- **Policy Number:** [Insert Policy Number]
- **Insured Name:** [Insert Insured Name]
- **Travel Dates:** [Insert Travel Dates]

Upon reviewing my travel plans, I discovered that the coverage was duplicated due to purchasing two separate policies for the same trip. I would appreciate your assistance in processing a refund for the duplicate coverage.

Attached to this letter are copies of both insurance policies for your reference.

Thank you for your prompt attention to this matter. Please let me know if you require any further information or documentation to process my request.

Sincerely,

[Your Full Name]

[Your Address]

[City, State, Zip Code]

[Your Phone Number]

[Your Email Address]