

Application for Life Insurance Policy Renewal

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Company Name]

[Company Address]

[City, State, Zip Code]

Subject: Application for Renewal of Life Insurance Policy No. [Policy Number]

Dear [Insurance Company's Customer Service Team/Specific Contact Name],

I am writing to formally request the renewal of my life insurance policy with the number [Policy Number], which is due to expire on [Expiration Date]. I have been a policyholder since [Start Date], and I wish to continue my coverage without interruption.

Please let me know if any additional information or documentation is required to process my renewal application. I am keen to ensure there is no lapse in coverage and would appreciate your prompt attention to this matter.

Thank you for your assistance. I look forward to your response.

Sincerely,

[Your Name]