

Confirmation of Intent to Extend Life Insurance Policy

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Insurance Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Insurance Company Representative's Name],

I am writing to formally confirm my intent to extend my life insurance policy with the policy number [Insert Policy Number]. After careful consideration, I have decided that continuing coverage is in my best interest and would like to proceed with the extension.

Please let me know if there are any additional documents or information you require from my side to complete this process. I look forward to your prompt response.

Thank you for your assistance.

Sincerely,

[Your Name]