

# Letter of Request for Life Insurance Coverage Extension

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Insurance Company/Agent's Name],

I am writing to formally request an extension of my life insurance coverage under policy number [Your Policy Number]. My current coverage is set to expire on [Expiration Date], and I would like to discuss the possibility of extending this coverage to ensure continued financial protection for my beneficiaries.

Due to [brief reason for extension request, e.g., changes in financial situation, health concerns], I believe that maintaining and possibly even increasing my life insurance coverage is essential at this time.

I would appreciate your prompt attention to this matter and would be grateful if we could schedule a time to discuss my options. Please feel free to contact me at your earliest convenience.

Thank you for your assistance.

Sincerely,

[Your Name]