

# Letter of Submission for Life Insurance Additional Benefits

Date: [Insert Date]

To,

The Manager,  
[Insurance Company Name]  
[Company Address]  
[City, State, Zip Code]

Subject: Submission for Additional Benefits under Life Insurance Policy

Dear [Manager's Name],

I hope this letter finds you well. I am writing to formally submit a request for additional benefits under my life insurance policy, Policy Number [Insert Policy Number].

In accordance with the terms and conditions of my current policy and based on my recent life circumstances, I wish to explore the additional coverage options available. I believe that these enhancements will be instrumental in providing greater security for my beneficiaries.

Please find attached the necessary documents for your review:

- Completed application form for additional benefits
- Proof of identity
- Medical history or documentation (if applicable)

I kindly request you to process my application at your earliest convenience and inform me if any further information or documentation is required.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Your Phone Number]  
[Your Email Address]