

Disclosure Letter for Insurance Coverage Gaps

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Insurance Company Representative's Name],

I am writing to formally disclose specific gaps in my insurance coverage as per our recent discussions and my policy review. Upon examination of my current insurance policy (Policy Number: [Insert Policy Number]), I have identified the following areas where coverage may be insufficient:

- 1. [Description of Coverage Gap 1]
- 2. [Description of Coverage Gap 2]
- 3. [Description of Coverage Gap 3]

I believe it is important to address these gaps to ensure adequate protection against unforeseen circumstances. I kindly request a review of my current policy and recommendations for potential adjustments or additional coverage options that may be available.

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

Sincerely,

[Your Name]

[Your Contact Information]