

Multi-Policy Discount Submission

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, ZIP Code]

Dear [Insurance Company Representative's Name],

I hope this message finds you well. I am writing to formally request the application of a multi-policy discount on my current insurance policies.

As a loyal customer, I hold the following policies with your company:

- Liability Insurance Policy Number: [Insert Policy Number]
- Vehicle Insurance Policy Number: [Insert Policy Number]

According to my understanding of your company's discount policy, I am eligible for a multi-policy discount given that I am currently insured under multiple policies. I believe this would not only benefit me financially but also strengthen my ongoing relationship with your esteemed company.

Please let me know what information you require from my end to process this request. I appreciate your attention to this matter and look forward to your prompt reply.

Thank you for your assistance.

Sincerely,

[Your Name]