

Accident Forgiveness Application

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip]

[Email Address]

[Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip]

Dear [Insurance Company Representative's Name],

I hope this letter finds you well. I am writing to formally request consideration for accident forgiveness due to my clean driving record. I have been a loyal customer with [Insurance Company Name] for [number of years] years and have maintained a spotless driving history.

On [Date of Accident], I was involved in a minor accident caused by [brief explanation of circumstances]. I understand that this incident may impact my insurance premiums, but I kindly request that my clean record be taken into account for accident forgiveness.

I have attached copies of my driving history and any relevant documentation you may require to support my application. I appreciate your attention to this matter and look forward to your positive response.

Thank you for your consideration.

Sincerely,

[Your Name]