

Inquiry for Renewal of Expired Policy

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Insurance Company Representative's Name],

I hope this message finds you well. I am writing to inquire about the renewal of my expired policy, [Policy Number], which lapsed on [Expiration Date]. I would like to understand the options available for renewing my coverage and any necessary steps I need to take to complete the process.

Furthermore, if there have been any updates or changes to the policy terms since my last renewal, kindly provide that information as well.

I appreciate your assistance and look forward to your prompt response.

Thank you.

Sincerely,

[Your Name]