

Application for Duplicate Policy Certificate

To,

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

Date: [Insert Date]

Subject: Request for Issuance of Duplicate Policy Certificate

Dear Sir/Madam,

I, [Your Name], am writing to request a duplicate certificate for my insurance policy numbered [Policy Number], which was originally issued on [Original Issue Date]. Unfortunately, I have misplaced the original document and am unable to locate it despite my efforts.

Details of the Policy:

- Policyholder Name: [Your Name]
- Policy Number: [Policy Number]
- Date of Birth: [Your Date of Birth]
- Contact Number: [Your Phone Number]

I kindly request you to process my application and issue a duplicate policy certificate at your earliest convenience. I understand any relevant fees may apply and I am willing to comply with the necessary procedures to obtain this document.

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

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Name]
[Your Address]
[City, State, Zip Code]