

Workplace Insurance Coverage Expansion Application

[Your Name]

[Your Job Title]

[Your Company]

[Company Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Provider Name]

[Insurance Company Address]

[City, State, Zip Code]

Subject: Application for Expansion of Workplace Insurance Coverage

Dear [Insurance Provider Contact Name],

I am writing to formally request an expansion of our current workplace insurance coverage. As our company continues to grow and evolve, it is imperative that our insurance policy reflects the increased risks and responsibilities associated with our operations.

Over the past year, we have seen significant changes including [briefly describe changes, e.g., expansion of workforce, new projects, introduction of new equipment, etc.]. These developments necessitate a reevaluation of our existing coverage to ensure that all employees and company assets are adequately protected.

We believe that expanding our coverage to include [list specific coverage areas, e.g., additional liability, worker's compensation enhancements, etc.] will greatly benefit both our employees and our organization as a whole.

Please find attached supporting documents that provide further details regarding our request. We would appreciate the opportunity to discuss this matter further and explore potential options.

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

Sincerely,

[Your Name]

[Your Job Title]

[Your Company]