

# Claim for Refund on Overpaid Insurance Premium

Your Name  
Your Address  
City, State, Zip Code  
Email Address  
Phone Number  
Date

Insurance Company Name  
Claims Department  
Company Address  
City, State, Zip Code

Subject: Request for Refund of Overpaid Insurance Premium

Dear Claims Department,

I am writing to formally request a refund for the overpaid premium on my insurance policy number **[Your Policy Number]**. After reviewing my payment history, I noticed that I have overpaid my premium by **[Amount Overpaid]** for the period covering **[Policy Period]**.

Enclosed with this letter are copies of relevant documents, including my payment history and the policy declaration page for your reference.

I kindly ask that you investigate this matter and issue a refund at your earliest convenience. Please let me know if you require any further information to expedite this process.

Thank you for your prompt attention to this matter.

Sincerely,  
[Your Name]