

Insurance Renewal Confirmation

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

To Whom It May Concern,

This letter serves as a confirmation of the renewal of my insurance policy with [Insurance Company Name]. The details of the policy are as follows:

Policy Number: [Insert Policy Number]

Renewal Date: [Insert Renewal Date]

Coverage Amount: [Insert Coverage Amount]

Please let me know if you require any further information or documentation to facilitate this renewal.

Thank you for your attention to this matter.

Sincerely,

[Your Name]