

Credit Card Life Insurance Application Request

Date: [Insert Date]

To:

[Insurance Company Name]

[Insurance Company Address]

Dear [Insurance Company Contact Name],

I am writing to formally request the application for credit card life insurance for my account number [Insert Account Number]. I am interested in securing life insurance coverage that will provide financial protection in the event of unforeseen circumstances.

Please provide me with the necessary documentation and information regarding the coverage options, premiums, and any additional requirements that may be necessary to complete the application process.

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

Sincerely,

[Your Name]

[Your Address]

[Your City, State, Zip Code]

[Your Phone Number]

[Your Email Address]