

Contractor Insurance Policy Modification Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Insurance Company's Name]

[Insurance Company's Address]

[City, State, Zip Code]

Dear [Insurance Agent's Name],

I am writing to formally request modifications to my contractor insurance policy, policy number [Insert Policy Number]. I would like to request the following changes:

- [Modification 1: Description]
- [Modification 2: Description]
- [Modification 3: Description]

These modifications are necessary due to [brief explanation of the reason for the changes]. I would appreciate your prompt attention to this matter and look forward to your confirmation of these changes.

Thank you for your assistance.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]