

# Insurance Endorsement Application

Date: [Insert Date]

To,

[Insurance Company Name]  
[Insurance Company Address]  
[City, State, Zip Code]

Subject: Application for Adding Dependents to Policy [Policy Number]

Dear [Insurance Company Representative],

I am writing to formally request an endorsement to my existing insurance policy [Policy Number] to add my dependents. Below are the details of the dependents I wish to include:

- Name: [Dependent Name 1] - Relationship: [Relationship]
- Name: [Dependent Name 2] - Relationship: [Relationship]
- Name: [Dependent Name 3] - Relationship: [Relationship]

Attached herewith are the necessary documents for your review:

1. Proof of Relationship (e.g., birth certificate, marriage certificate)
2. Any additional documentation as required

I request you to process this application at your earliest convenience. Should you need further information or documentation, please feel free to contact me at [Your Phone Number] or [Your Email Address].

Thank you for your assistance.

Sincerely,

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Your Contact Number]