

Insurance Premium Waiver Application

Date: [Insert Date]

To,
The Manager,
[Insurance Company Name],
[Company Address],
[City, State, Zip Code]

Subject: Application for Insurance Premium Waiver due to Job Loss

Dear [Manager's Name],

I am writing to formally request a waiver for my insurance premium payment due to my recent job loss. My policy number is [Policy Number], and I have been a loyal customer since [Start Date of Policy].

Due to unforeseen circumstances, I was laid off from my position at [Previous Company Name] on [Date of Job Loss], which has significantly impacted my financial situation. I understand the importance of maintaining my insurance coverage, and I am committed to resuming payments as soon as I secure new employment.

I kindly request your consideration in waiving my premium for the duration of my job search. I have attached all necessary documentation, including my termination letter and evidence of my job application efforts.

Thank you for your understanding and support during this challenging time. I look forward to your positive response.

Sincerely,
[Your Name]
[Your Address]
[City, State, Zip Code]
[Your Phone Number]
[Your Email Address]