## **Request for Insurance Premium Waiver**

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Your Email Address]

[Your Phone Number]

To: [Insurance Company Name]

[Insurance Company Address]

[City, State, ZIP Code]

Subject: Request for Waiver of Insurance Premium Due to Military Service

Dear [Insurance Company Contact/Claims Department],

I am writing to formally request a waiver for my insurance premium due to my active military service. My name is [Your Name], and my policy number is [Your Policy Number]. As an enlisted service member, I have been deployed and temporarily unable to maintain my premium payments.

In accordance with [relevant laws or policies, e.g., Servicemembers Civil Relief Act], I am entitled to request a waiver of my insurance premiums during my service. I have attached documentation of my military service for your reference.

I appreciate your understanding and assistance with this matter and look forward to your prompt response regarding the status of my waiver request.

Thank you for your attention to this important matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]