

Request for Clarification

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Recipient's Name]

[Company's Name]

[Company's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to request clarification regarding the documentation required for my insurance application (Policy Number: [Your Policy Number]).

While reviewing the guidelines provided, I came across some points that I would appreciate further clarification on:

- Specific documents required for proof of income.
- Any additional information needed for pre-existing conditions.
- The format in which the documents should be submitted.

Your assistance in this matter would be greatly appreciated, as it will help ensure a smooth application process. Thank you for your attention to this request. I look forward to your prompt response.

Best regards,

[Your Name]

[Your Job Title, if applicable]