

[Your Name]
[Your Address]
[Your Phone Number]
[Your Email Address]

[Date]

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

Subject: Request for Replacement of Lost Life Insurance Policy Document

Dear Customer Service Department,

I am writing to formally request a replacement copy of my life insurance policy document. Unfortunately, the original policy document has been lost or misplaced.

Please find my policy details below for your reference:

- **Policyholder Name:** [Full Name on Policy]
- **Policy Number:** [Policy Number]
- **Social Security Number:** [Last 4 Digits or Full SSN as required]
- **Date of Birth:** [Date of Birth]

I understand there may be a fee associated with issuing a duplicate policy. Please notify me of any costs or additional forms required to complete this request. If possible, I would prefer to receive a digital copy via email in addition to a physical copy sent to my address listed above.

Thank you for your assistance in this matter. I look forward to receiving the replacement documents at your earliest convenience.

Sincerely,

[Your Signature]

[Your Printed Name]