

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

[Date]

[Recipient Name or Department]
[Company Name]
[Company Address]
[City, State, Zip Code]

Subject: Comprehensive Policy Review and Marital Status Update

Dear [Recipient Name],

I am writing to formally notify [Company Name] of a change in my marital status and to request a comprehensive review of my existing policy, account number [Policy Number].

Status Change Information:

Current Marital Status: Married
Date of Change: [Date of Marriage]
Spouse's Full Name: [Spouse's Name]
Spouse's Date of Birth: [Spouse's DOB]

Requested Policy Updates:

- Update my personal records to reflect my current marital status.
- [Optional: Change my legal name from [Former Name] to [New Name].]
- Add my spouse as a [Beneficiary/Additional Insured/Dependent] on this policy.
- Review current coverage limits to ensure they meet our new household requirements.
- Provide information on any multi-policy or marital discounts now available to us.

Attached please find a copy of our marriage certificate for your records. Please let me know if there are additional forms required to finalize these updates.

I look forward to receiving a summary of the reviewed policy and any adjustments to my premiums. Thank you for your assistance.

Sincerely,

[Your Signature]

[Your Printed Name]