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

[Date]

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

Subject: Request to Add Lienholder to Policy #[Your Policy Number]

To Whom It May Concern,

I am writing to request the addition of a lienholder to my existing auto insurance policy, effective immediately. I have recently financed the vehicle insured under this policy.

Please update my policy to include the following entity as the loss payee/lienholder:

Lienholder Information:
Name of Financial Institution: [Bank/Lender Name]
Lienholder Address: [Lender Address, City, State, Zip Code]
Loan Account Number: [Your Loan Number]

Vehicle Information:
Year: [Year]
Make: [Make]
Model: [Model]
VIN: [Vehicle Identification Number]

Once the lienholder has been added, please provide me with an updated Proof of Insurance or Declarations Page. I also request that you send a copy of the updated certificate to the lienholder at the address listed above.

If you require any additional information or documentation to complete this request, please contact me at [Your Phone Number].

Sincerely,

[Your Signature]

[Your Printed Name]