

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

[Date]

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

**Subject: Request for Policy Revision - Policy Number: [Your Policy Number]**

To Whom It May Concern,

I am writing to formally request a revision to my current automobile insurance policy, effective as of [Date].

I would like to make the following changes to my coverage:

- **Vehicle Changes:** [e.g., Add/Remove 2023 Toyota Camry, VIN: XXXXXXXXXXXXXXXX]
- **Driver Changes:** [e.g., Add/Remove John Doe, License Number: XXXXXXXXX]
- **Coverage Adjustments:** [e.g., Increase liability limits to \$100,000 / Change deductible to \$500]
- **Usage Update:** [e.g., Changed from commuting to pleasure use / Updated annual mileage to 8,000 miles]

Please review these requested changes and provide an updated policy declaration page reflecting the new terms and any adjustments to my premium. If you require any additional documentation or information to process these revisions, please let me know at your earliest convenience.

Thank you for your assistance with this matter.

Sincerely,

[Your Signature]

[Your Printed Name]