

[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]

RE: Request for Cash Value Verification

Policyholder Name: [Full Name on Policy]

Policy Number: [Policy Number]

To Whom It May Concern,

I am writing to formally request a written verification of the current cash value of the above-referenced life insurance policy.

Please provide a statement or letter including the following details:

- The current gross cash surrender value.
- The net cash surrender value (after any outstanding loans or liens).
- The current death benefit amount.
- The date the policy was issued and the current status (e.g., active, paid-up).
- The amount and frequency of premium payments.

I require this information for [state purpose, e.g., financial planning / mortgage application / asset verification] purposes. Please send this documentation to my address listed above or via email at [Your Email Address].

If you require any further authorization or have specific forms for this request, please let me know as soon as possible.

Thank you for your prompt assistance with this matter.

Sincerely,

[Your Signature]

[Your Printed Name]