

Re: (date) to (your
name) (address) dear



**ASSIGN
BUSTER**

Re: Policy No. _____ I am insured with you for _____ (Amount) and my policy No. _____ is quoted above. I have been paying premium to you regularly for the last about _____ (No. of years) but my circumstances have changed and I find myself unable to continue making payments in future.

I, therefore, request you to convert my policy as paid-up and let me know how much amount I shall be entitled to get at the time of maturity. My policy is enclosed herewith for necessary action. Thanking you, Yours faithfully,
(Your Name)

Reply regarding paid-up policy

From(Insurance company Name)(Address)(Date) To(Your Name)(Address)

Dear Sir, Re : Policy No. _____ We are in receipt of your letter dated _____ along with the above policy. We are sorry to learn that owing to certain circumstances, you are unable to continue with this policy and desire us to convert it into paid-up. We add to inform you that the paid-up value of your policy with effect from _____ (Date) is _____ (Amount) excluding bonus. If you stop paying your premium, the policy will automatically become paid-up for the above amount and there is no need for formally endorsing it as such.

We take the liberty of drawing your attention that by making it paid-up, the policy will not be able to fulfill your twin objects of providing for your old age and building a house. In a paid-up policy the sum assured is considerably reduced and this cut will drastically reduce your purchasing power with this

sum. We don't know why you have decided on this step because your general remarks have taken us nowhere.

It is possible someone might have misguided you. We, therefore, request you to reconsider your decision and be frank with us. It is possible we may be able to help you in continuing your policy. Remember we are increasing bonus year after year and this year we fixed it at _____ (Amount) per thousand. Just imagine how much you will be losing by not changing your mind! Thanking you, Yours faithfully,(Branch Manager Name)(Insurance Company Name)(Address)