

partial withdrawal request

Subject: Request for Partial Surrender - Endowment Policy No. [Policy Number]

Dear Customer Service Team,

I am writing to request a partial surrender of my endowment policy due to urgent financial requirements.

Policy Information:

Policy Number: [Policy Number]

Policy Holder: [Your Name]

Current Sum Assured: [Amount]

Requested Partial Surrender Amount: [Amount]

Policy Years Completed: [Number]

I understand that partial surrender may affect my policy's maturity value and future benefits.

However, due to [brief reason - medical emergency/education expenses/business needs], I require immediate access to funds.

I have reviewed the policy terms regarding partial surrender and accept the applicable charges and reduction in sum assured. Please process this request and provide details about:

- Surrender value available
- Applicable charges
- Revised sum assured after withdrawal
- Impact on maturity benefits

Please find attached the required surrender form and supporting documents. I request you to transfer the surrender amount to my registered bank account [Account Number] with [Bank Name].

I appreciate your prompt processing of this request.

Yours faithfully,

[Your Name]

[Signature]

[Date]

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