

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

Vermont Department of Financial Regulation
Insurance Division
89 Main Street, 3rd Floor
Montpelier, VT 05620-3101

Dear [Recipient's Name],

Subject: Insurance License Renewal - [Your License Number]

I hope this letter finds you well. I am writing to formally request the renewal of my insurance license, numbered [Your License Number], which is set to expire on [Expiration Date].

I have completed the necessary continuing education requirements in accordance with Vermont state regulations and have enclosed the relevant documentation for your review.

Please let me know if there are any additional forms or fees required to process my renewal. I appreciate your assistance in this matter and look forward to your prompt response.

Thank you for your attention to this request.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]

[Your License Number]