Date: [Date]

Policy Number: [Policy Number]

Dear [Policyholder Name],

Congratulations on your new driver! Adding a teenager to your auto insurance policy is a significant life event. To ensure you have the appropriate coverage and to identify any eligible discounts, please complete this questionnaire regarding the new driver in your household.

Driver Information:

- Full Name: _____
- Date of Birth: _____
- Driver's License Number: _____
- Date Licensed/Permitted: _____

Vehicle Information:

- Will this driver be the primary operator of a specific vehicle? [ ] Yes [ ] No
- If yes, please specify the Year, Make, and Model: _____

Discount Eligibility:

- Is the driver a full-time student with a "B" average or higher? [ ] Yes [ ] No
- Has the driver completed a certified Driver's Education course? [ ] Yes [ ] No
- Will the driver be attending school more than 100 miles away without a car? [ ] Yes [ ] No

Coverage Adjustments:

Adding a teen driver may impact your liability limits and deductibles. Please indicate if you would like to schedule a call to review your current coverage levels.

[ ] Yes, please call me at: _____
[ ] No, please just provide the updated premium quote.

Please return this form by [Due Date] via email to [Email Address] or mail it to our office. Failure to disclose a licensed household resident may result in a denial of future claims.

Sincerely,

[Agent Name]
[Agency Name]
[Phone Number]