[Date]

[Policyholder Name]
[Address Line 1]
[Address Line 2]
[City, State, Zip Code]

Subject: Coverage Adjustment Questionnaire - Empty Nest Life Transition

Dear [Policyholder Name],

Our records indicate that your household may be transitioning into an "empty nest" phase. Significant life events, such as children moving out for college or independent living, often change your insurance needs and may qualify you for reduced premiums or updated coverage limits.

To ensure your policy reflects your current lifestyle, please complete this brief questionnaire and return it by [Date].

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1. Household Changes:
Has a dependent officially moved out of the primary residence?
[ ] Yes [ ] No

2. Vehicle Usage:
Will any vehicles previously used by your children remain at your residence?
[ ] Yes [ ] No
If yes, will these vehicles be driven less than 5,000 miles per year?
[ ] Yes [ ] No

3. Student Away Discount:
Is your child attending a school more than 100 miles away without a car?
[ ] Yes [ ] No

4. Home Usage:
Are you planning to renovate, downsize, or rent out any vacant rooms in your home?
[ ] Yes [ ] No

5. Valuable Items:
Did your children take high-value scheduled items (laptops, jewelry, musical instruments) with them?
[ ] Yes [ ] No

Once we receive your responses, a representative will contact you to discuss potential savings and policy updates. If you prefer to complete this over the phone, please call us at [Phone Number].

Sincerely,

[Agent Name]
[Company Name]
[Contact Information]