

[Date]

[Recipient Name]

[Recipient Title]

[Company Name]

[Street Address]

[City, State, Zip Code]

RE: Proof of Insurance - [Project Name/Contract Number]

Dear [Recipient Name],

Please find enclosed the Certificate of Insurance (COI) for [Your Company Name] as required by our contract agreement dated [Date of Contract].

The attached document confirms that we currently maintain the following coverage:

- General Liability
- Workers' Compensation
- Professional Liability / Errors and Omissions
- Automobile Liability

We have ensured that [Recipient Company Name] is listed as an "Additionally Insured" party as per the project specifications. This coverage is active and will remain in effect until [Policy Expiration Date].

Should you require any further documentation or have questions regarding our coverage limits, please contact me directly at [Your Phone Number] or [Your Email Address].

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Job Title]

[Your Company Name]

Enclosure: Certificate of Insurance