[Agency Name]
[Agency Address]
[City, State, Zip Code]
[Phone Number]

[Date]

[Client Name]
[Business Name]
[Business Address]
[City, State, Zip Code]

Dear [Client Name],

Subject: Important Compliance Information Regarding Your Workers' Compensation

As a valued client of [Agency Name], we currently help protect your business with your [Current Policy Type, e.g., General Liability] coverage. While reviewing your file, we noticed that we do not currently handle your Workers' Compensation insurance.

In the state of [State Name], Workers' Compensation is a mandatory legal requirement for almost every employer. Beyond simple state compliance, having this coverage is essential to protect your business from the high costs of workplace injuries, medical expenses, and potential legal action.

By consolidating your Workers' Compensation with your existing policies at our agency, you may benefit from:

- Multi-policy bundling discounts
- Simplified billing and policy management
- A streamlined claims process
- Annual compliance reviews to ensure your classifications are accurate

We would like to provide you with a no-obligation quote to ensure you are fully compliant with state laws and are receiving the most competitive rate available.

Please contact us at [Phone Number] or reply to this letter to schedule a brief five-minute review of your current business needs.

Thank you for your continued trust in our agency.

Sincerely,

[Agent Name]
[Title]
[Agency Name]