

[Date]

[Client Name]

[Client Address]

[City, State, Zip Code]

**Subject: Important Information Regarding the Transfer of Your Policy**

Dear [Client Name],

Welcome to [New Company Name]. We are pleased to inform you that your [Policy Type, e.g., Auto/Life/Home] insurance policy, previously held with [Former Company Name], has been successfully transferred to our care, effective [Effective Date].

We want to ensure this transition is seamless for you. Please note the following details regarding your account:

- **Policy Number:** [Policy Number]
- **Coverage Terms:** Your current coverage, premiums, and expiration dates remain unchanged by this transfer.
- **Payments:** [Instructions for payment, e.g., Please continue using your existing automated payment method / Please register on our portal for future payments].

At [New Company Name], we are committed to providing you with exceptional service. You now have access to our digital tools, including our mobile app and 24/7 online client portal at [Website URL].

Enclosed/Attached you will find your updated policy documents and new identification cards. Please review these documents and keep them for your records.

If you have any questions or need to update your information, please contact your dedicated representative, [Agent Name], at [Phone Number] or email us at [Email Address].

Thank you for placing your trust in us. We look forward to serving you.

Sincerely,

[Signature]

[Name of Executive/Manager]

[Title]

[New Company Name]