

[Date]

[Policyholder Name]

[Address]

[City, State, Zip Code]

Subject: Confirmation of Policy Update - Addition of Teen Driver

Dear [Policyholder Name],

This letter confirms that we have successfully updated your auto insurance policy, number [Policy Number], to include [Teen Driver Name] as a listed driver effective [Date].

Updated Policy Summary:

- **New Driver Name:** [Teen Driver Name]
- **Effective Date:** [Date]
- **New Premium Amount:** [Amount]
- **Next Billing Date:** [Date]

We have applied the following discounts to your account (if applicable):

- [e.g., Good Student Discount]
- [e.g., Driver Training Completion Discount]

Enclosed you will find your updated insurance identification cards and the revised policy declaration page. Please ensure that the new driver has a copy of the insurance card available whenever they are operating the vehicle.

If you have any questions regarding these changes or would like to review your coverage limits, please contact your agent at [Phone Number] or visit our website at [Website].

Thank you for choosing [Company Name]. Drive safely.

Sincerely,

[Agent Name/Company Representative]

[Company Name]