

[Agency Name]
[Current Address Line 1]
[Current Address Line 2]
[Date]

RE: NOTICE OF CHANGE OF BUSINESS ADDRESS

Dear Valued Client,

We are writing to inform you that effective [Date of Move], [Agency Name] will be moving to a new location. Please update your records with our new contact information provided below:

New Office Address:

[New Street Address]
[City, State, Zip Code]

Please note that our phone numbers, email addresses, and website will remain the same. Our office hours will also continue to be [Business Hours].

This move will not affect your insurance coverage or any pending claims. All your existing policies remain in full force. We look forward to continuing to serve your insurance needs from our new location.

If you have any questions regarding this change, please feel free to contact us at [Phone Number] or [Email Address].

Sincerely,

[Your Name/Principal Agent Name]
[Title]
[Agency Name]