

[Current Date]

[Insurance Company Name]
[Insurance Company Address]
[City, State, Zip Code]

Subject: Notification of Change in Primary Contact Details

Dear [Contact Person Name or Customer Service Department],

This letter is to formally notify you of a change in the primary contact person for our insurance agency, [Agency Name], regarding the following policy/account number(s):

Policy/Account Number(s): [List Policy Numbers]

Effective as of [Effective Date], the primary contact person has been updated to the following:

New Primary Contact Name: [Full Name]
Title/Position: [Job Title]
Email Address: [Email Address]
Phone Number: [Phone Number]
Mailing Address: [Address, if different from agency address]

Please ensure that all future correspondence, billing statements, and policy updates are directed to the individual named above. The previous contact person, [Old Contact Name], should be removed from the primary position on our account.

If you require any further documentation or have specific forms for us to complete to finalize this update, please let us know immediately.

Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature]
[Your Printed Name]
[Your Title]
[Agency Name]