

[Date]

[Insurance Company Name]

[Underwriting Department]

[Company Address]

[City, State, Zip Code]

**RE: Request to Add Additional Named Insured to Policy**

**Policy Number:** [Enter Policy Number]

**Property Address:** [Enter Property Address]

To Whom It May Concern,

Please accept this formal request to amend the above-referenced commercial property insurance policy. We request that the following Trust be added as an **Additional Named Insured** effective [Insert Date]:

**Full Name of Trust:** [Insert Formal Name of Trust, e.g., The John Doe Revocable Living Trust]

**Date of Trust:** [Insert Date Trust was Established]

**Trustee(s):** [Insert Name of Trustee(s)]

**Address for Trust:** [Insert Mailing Address for Trust]

The reason for this request is that the legal title of the insured property has been transferred to the Trust for estate planning and asset management purposes. The Trust now holds an insurable interest in the premises.

Please issue an endorsement reflecting this change and provide an updated Certificate of Insurance for our records. If there are any additional forms required or adjustments to the premium, please notify us immediately.

Thank you for your prompt attention to this matter.

Sincerely,

[Signature]

[Printed Name of Current Policyholder/Authorized Representative]

[Phone Number]

[Email Address]