

[Date]

[Certificate Holder Name]

[Company Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

Subject: Confirmation of Endorsement for Policy Number: [Policy Number]

Dear [Contact Person Name],

This letter serves to confirm that [Your Company Name] has processed the requested endorsement(s) regarding the insurance policy referenced above.

As requested, [Certificate Holder Name] has been officially added to the policy as a [Type of Endorsement, e.g., Additional Insured]. This endorsement is effective as of [Effective Date] and will remain in effect until [Expiration Date or "the expiration of the policy"].

Please find the attached Certificate of Insurance (COI) and the specific endorsement page(s) reflecting this update for your records.

The coverage provided under this endorsement includes:

- [Coverage Type 1, e.g., General Liability]
- [Coverage Type 2, e.g., Professional Liability]

If you have any questions or require further documentation, please contact our office at [Phone Number] or [Email Address].

Sincerely,

[Your Name/Signature]

[Your Title]

[Your Company Name]