

[Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

**Subject: Confirmation of Addition of Teen Driver to Policy [Policy Number]**

Dear [Policyholder Name],

This letter confirms that we have successfully added [Teen Driver Name] to your automobile insurance policy effective [Effective Date].

**Driver Details:**

- Driver Name: [Teen Driver Name]
- Date of Birth: [DOB]
- License Number: [License Number]

**Policy Impact:**

As a result of this addition, your premium has been adjusted. The new total premium for the remainder of the policy term is \$[Amount]. Please find the enclosed updated Declarations Page and proof of insurance cards for your records.

**Available Discounts:**

We offer several discounts that your teen may be eligible for, including:

- Good Student Discount (requires a 3.0 GPA or higher)
- Driver Training Completion Discount
- Away-at-School Discount

If you have any questions or would like to submit documentation for discounts, please contact your agent at [Agent Phone Number] or visit our website at [Website URL].

Thank you for choosing [Insurance Company Name].

Sincerely,

[Sender Name]

[Title]

[Insurance Company Name]