

[Your Name]  
[Your Policy Number]  
[Your Address]  
[City, State, Zip Code]  
[Your Phone Number]  
[Date]

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

**Subject: Proof of Licensure for Addition of Teen Driver**

To Whom It May Concern,

I am writing to formally request the addition of a new driver to my existing auto insurance policy, [Policy Number].

Please find the details of the driver to be added below:

- Full Name: [Teen Driver's Full Name]
- Date of Birth: [MM/DD/YYYY]
- Driver's License Number: [License Number]
- State of Issuance: [State]
- Date of Licensure: [Date License was Issued]

Attached to this letter is a clear copy of the driver's valid permanent license as proof of licensure. Please update my policy to include this driver effective as of [Effective Date].

Please notify me once the addition is complete and provide an updated declarations page reflecting the changes and any adjustments to my premium.

Thank you for your assistance.

Sincerely,

[Your Signature]

[Your Printed Name]