[Date]
[Policyholder Name]
[Address Line 1]
[Address Line 2]

RE: Premium Invoice - Liquor Liability Addition Endorsement
Policy Number: [Policy Number]
Endorsement Effective Date: [Effective Date]

Dear [Policyholder Name],

This letter is to confirm that the requested Liquor Liability coverage has been added to your insurance policy via endorsement. Attached you will find the updated policy documents reflecting this change.

The addition of this coverage has resulted in an additional premium charge as follows:

- **Endorsement Premium:** $[Amount]
- **Applicable Taxes/Fees:** $[Amount]
- **Total Amount Due:** $[Total Amount]

Please remit payment by [Due Date] to ensure your coverage remains in good standing. You may pay your invoice through the following methods:

- **Online:** [Website URL]
- **By Phone:** [Phone Number]
- **By Mail:** Please send a check to the address listed on the attached invoice.

If you have any questions regarding this endorsement or your updated premium, please contact your agent at [Agent Phone Number] or email us at [Email Address].

Thank you for choosing [Insurance Company Name].

Sincerely,

[Sender Name]
[Title]
[Insurance Company Name]