

[Date]

[Policyholder Name]

[Policyholder Address]

[City, State, Zip Code]

**Re: Issuance of Project Specific Completed Operations Endorsement**

**Policy Number:** [Policy Number]

**Project Name:** [Project Name/Description]

**Project Location:** [Project Address/Location]

Dear [Contact Name],

We are pleased to inform you that the Project Specific Completed Operations Endorsement has been formally issued and added to your insurance policy referenced above.

This endorsement extends coverage for bodily injury or property damage arising out of your work performed on the specified project, subject to the terms, conditions, and expiration dates defined within the endorsement language. Please note that this extension applies specifically to the project listed herein.

Attached is a copy of the endorsement for your permanent records. We recommend that you review the document carefully to ensure all project details and coverage limits meet your contractual requirements.

If you have any questions or require further modifications, please contact your insurance agent or our underwriting department at [Phone Number] or [Email Address].

Thank you for choosing [Insurance Company Name].

Sincerely,

[Sender Name]

[Title]

[Insurance Company/Agency Name]

**Enclosure:** Project Specific Completed Operations Endorsement