

[Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

Re: Renewal Policy Number: [Policy Number]

Endorsement: Completed Operations Coverage

Dear [Policyholder Name],

We are pleased to confirm that your insurance policy has been renewed for the period effective [Start Date] to [Expiration Date].

Enclosed with this letter, please find the **Completed Operations Endorsement**. This document outlines the continued coverage for bodily injury or property damage arising out of your completed work or services, subject to the terms and limits defined in your policy.

Please review this endorsement carefully and file it with your original policy documents. It is important to ensure that all business activities and locations are accurately reflected in your current coverage summary.

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

Thank you for choosing [Insurance Company Name] for your business insurance needs.

Sincerely,

[Sender Name]

[Title]

[Insurance Company Name]