

[Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

**RE: Policy Number: [Policy Number]**

**Endorsement Type: Mid-Term Modification - Completed Operations**

Dear [Policyholder Name],

We are writing to confirm that the requested mid-term modification to your insurance policy has been processed. Please find the enclosed endorsement documentation regarding the update to your Completed Operations coverage.

**Summary of Changes:**

- **Effective Date of Change:** [Date]
- **Description of Modification:** [Briefly describe change, e.g., Addition of specific project site / Change in limits]
- **Premium Adjustment:** [Amount of Additional/Return Premium or "No Change"]

This endorsement is now part of your legal insurance contract. We recommend that you review the attached documents carefully and file them with your original policy. All other terms, conditions, and exclusions of the policy remain unchanged.

If you have any questions regarding this endorsement or require further assistance, please contact your agent or our customer service department at [Phone Number].

Thank you for choosing [Insurance Company Name].

Sincerely,

[Name/Signature]

[Title]

[Insurance Company Name]

Enclosure: Endorsement [Number/ID]