

[Date]

[Policyholder Name]

[Policyholder Address]

[City, State, Zip Code]

Re: Endorsement - Prior Acts Coverage for Employment Practices Liability (EPL)

Policy Number: [Policy Number]

Dear [Policyholder Name],

This letter serves as a formal endorsement to your Employment Practices Liability (EPL) insurance policy. We are pleased to confirm that Prior Acts Coverage has been added to your policy, effective [Effective Date].

Endorsement Details:

- **Retroactive Date:** [Retroactive Date]
- **Coverage Scope:** This endorsement extends coverage to include claims made against the insured during the current policy period for "wrongful acts" that occurred on or after the Retroactive Date specified above and before the start of the current policy term.

Conditions:

This coverage is subject to the following conditions:

1. The claim must first be made against the insured and reported to the insurer during the current policy period.
2. As of the effective date of this endorsement, no insured had knowledge of any facts, circumstances, or situations which could reasonably be expected to give rise to a claim.
3. All other terms, exclusions, and conditions of the original policy remains in full force and effect.

Please attach this endorsement letter to your original policy documents for your records. If you have any questions regarding this coverage or your policy limits, please contact your insurance agent or representative.

Sincerely,

[Signature]

[Name of Authorized Representative]

[Title]

[Insurance Company Name]