

[Agency Name]  
[Agency Address]  
[City, State, Zip Code]  
[Phone Number]

[Date]

[Client Name]  
[Client Address]  
[City, State, Zip Code]

**RE: Protective Safeguards Endorsement Acknowledgment**

Policy Number: [Policy Number]  
Property Location: [Insured Property Address]

Dear [Client Name],

Your insurance policy contains a **Protective Safeguards Endorsement**. This endorsement is a condition of your coverage and requires you to maintain certain safety systems at your premises in active, working order.

According to your policy, the following safeguards are required:

- [Requirement 1, e.g., Automatic Sprinkler System]
- [Requirement 2, e.g., Centrally Stationed Fire/Burglar Alarm]
- [Requirement 3, e.g., Hood and Duct Extinguishing System]

**Important Warning:** If these systems are not maintained, are disabled, or are not in operation at the time of a loss, the insurance company may deny your claim entirely. It is your responsibility to notify us immediately if any system becomes non-functional or is disconnected for any reason.

Please sign below to acknowledge that you have read and understand the requirements of this endorsement and the potential impact on your coverage.

Sincerely,

[Agent Name]  
[Agency Name]

---

**Client Acknowledgment:**

I acknowledge that I have received and reviewed the Protective Safeguards Endorsement. I understand that failure to maintain the required systems may result in a total denial of coverage for a loss.

---

Client Signature

---

Date