

[Date]

[Policyholder Name]

[Policyholder Address]

[City, State, Zip Code]

RE: Commercial Fleet Expansion Approval - Policy #[Policy Number]

Dear [Contact Name],

We are pleased to inform you that your request to expand your commercial auto fleet coverage has been reviewed and approved by our underwriting department.

The following vehicles have been added to your policy effective [Effective Date]:

- [Vehicle 1: Year, Make, Model, VIN]
- [Vehicle 2: Year, Make, Model, VIN]
- [Vehicle 3: Year, Make, Model, VIN]

Coverage Summary:

The added units will be subject to the existing policy limits and deductibles as outlined in your current insurance contract. An updated Schedule of Covered Autos and your revised Certificate of Insurance are attached to this letter.

Premium Adjustment:

The addition of these vehicles has resulted in a pro-rated premium increase of \$[Amount]. Your updated billing statement reflecting this change will be sent separately.

Please review the attached documents for accuracy. If you have any questions or need to make further modifications to your fleet, please contact your account manager at [Phone Number] or [Email Address].

Thank you for choosing [Insurance Company Name] for your commercial fleet needs.

Sincerely,

[Underwriter Name]

[Underwriter Title]

[Insurance Company Name]