

[Your Name/Company Name]  
[Your Address]  
[City, State, Zip Code]  
[Phone Number]  
[Email Address]

[Date]

[Insurance Company Name]  
[Agent Name]  
[Insurance Company Address]  
[City, State, Zip Code]

**RE: Notice of Extended Operating Hours and Request for Liquor Liability Coverage Expansion**

**Policy Number: [Your Policy Number]**

Dear [Agent Name/Underwriting Department],

I am writing to formally notify you of a change in operations for [Name of Establishment]. Effective [Date of Change], we will be extending our operating hours to include alcohol service during the following times:

**New Operating Hours:**

[Monday - Thursday: Start Time to End Time]  
[Friday - Saturday: Start Time to End Time]  
[Sunday: Start Time to End Time]

Currently, our Liquor Liability Insurance reflects our previous hours of [Old Hours]. We request an endorsement to our existing policy to ensure full coverage for these extended hours.

Please review our current policy and advise on any adjustments to our premiums or terms. We confirm that all existing alcohol safety protocols, including [mention specific training, e.g., TIPS or ServSafe], will continue to be strictly enforced during these additional hours.

Please provide a revised Certificate of Insurance and confirmation of coverage expansion at your earliest convenience. If you require further information or a formal application for this change, please let me know.

Thank you for your assistance.

Sincerely,

[Your Signature]  
[Your Printed Name]  
[Your Title]