

[Date]

[Client Name]

[Company Name]

[Street Address]

[City, State, Zip Code]

**Subject: Welcome to [Insurance Agency/Company Name] - Commercial Auto Policy
#[Policy Number]**

Dear [Client Name],

Thank you for choosing [Insurance Agency/Company Name] for your commercial auto insurance needs. We are pleased to confirm that your coverage is now active as of [Effective Date].

At [Insurance Agency/Company Name], we understand that your vehicles are vital to your business operations. Our goal is to provide you with reliable protection and exceptional service so you can focus on growing your business.

Your Policy Package

Attached to this letter, you will find your essential policy documents. Please review them carefully and keep them in a safe place. Your package includes:

- Policy Declaration Page (Summary of coverages and limits)
- Insurance Identification Cards (Please place one in each insured vehicle)
- Certificate of Insurance
- Claims Reporting Instructions

Managing Your Policy

If you need to make changes to your policy, such as adding a new vehicle or updating driver information, please contact your agent at [Phone Number] or visit our online portal at [Website URL].

In Case of an Accident

Should you need to file a claim, our claims department is available [24/7 / during business hours] at [Claims Phone Number]. Prompt reporting is essential to ensure the fastest possible resolution.

We appreciate your trust in us. If you have any questions regarding your coverage, please do not hesitate to reach out.

Sincerely,

[Agent Name]

[Title]

[Insurance Agency/Company Name]

[Phone Number]

[Email Address]