[Date]

[Policyholder Name]
[Address Line 1]
[Address Line 2]

Subject: Welcome to [Insurance Company Name] - Policy Number: [Policy Number]

Dear [Policyholder Name],

Thank you for choosing [Insurance Company Name] for your personal auto insurance needs. We are pleased to confirm that your new policy is now active, effective [Effective Date].

Enclosed you will find your policy documents, including:

- Insurance Identification Cards (Keep these in your vehicle)
- Policy Declarations Page
- Coverage Summary
- Terms and Conditions

Next Steps:

Please review your documents carefully to ensure all information, including vehicle details and coverage limits, is correct. If you need to make any changes or have questions about your premium, please contact us immediately.

How to Manage Your Policy:

You can manage your policy 24/7 through our online portal at [Website URL]. Here you can pay your bill, view documents, or start a claim.

In the Event of an Accident:

If you need to report a claim, please call our 24-hour claims service at [Claims Phone Number] or visit [Claims URL].

We appreciate your business and look forward to protecting you on the road.

Sincerely,

[Agent Name/Department Name]
[Insurance Company Name]
[Phone Number]
[Email Address]