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

[Date]

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

Dear [Client Name],

Welcome to [Agency Name]! We are pleased that you have chosen us to handle your insurance needs. Our goal is to provide you with excellent service and the peace of mind that comes with knowing you are properly protected.

Enclosed you will find your new policy documents for [Policy Type/Policy Number]. Please review these documents carefully to ensure all information is correct. We recommend keeping these papers in a safe place for your records.

As your dedicated insurance agency, we are here to assist you with:

- Answering questions regarding your coverage
- Processing policy changes or updates
- Assisting with the claims process
- Conducting annual insurance reviews

Your primary point of contact will be [Agent Name], who can be reached directly at [Agent Phone Number] or [Agent Email].

Thank you for placing your trust in [Agency Name]. We look forward to a long and successful relationship.

Sincerely,

[Agent Signature]
[Agent Printed Name]
[Title]