

[Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

RE: Acknowledgment of Coverage Limit Increase

Policy Number: [Policy Number]

Effective Date of Change: [Date]

Dear [Policyholder Name],

This letter serves as formal acknowledgment of your request to increase the coverage limits on your Inland Marine insurance policy. We have processed this change to ensure your equipment and property are adequately protected.

The revised coverage details are as follows:

- **Previous Limit:** \$[Amount]
- **New Limit:** \$[Amount]
- **Scheduled Items/Property Covered:** [Description of Property]

Please find the enclosed policy endorsement which reflects this adjustment. We recommend reviewing the document carefully to ensure the new limits meet your specific requirements. This change may result in a premium adjustment, which will be reflected in your next billing statement.

If you have any questions regarding this increase or if further modifications are needed, please contact your agent or our customer service department at [Phone Number].

Thank you for choosing [Insurance Company Name].

Sincerely,

[Sender Name]

[Title]

[Insurance Company Name]