[Date]

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

RE: Request to Add Driver to Commercial Auto Policy #[Policy Number]

To Whom It May Concern,

Please accept this formal request to add a new driver to our existing commercial auto insurance policy, effective as of [Requested Effective Date].

Below are the details for the driver to be added:

- **Full Legal Name:** [Driver's Full Name]
- **Date of Birth:** [MM/DD/YYYY]
- **Driver's License Number:** [Number]
- **State of Issuance:** [State]
- **Date of Hire:** [MM/DD/YYYY]
- **Job Title/Role:** [Role]

Attached to this letter, please find a copy of the driver's license and a recent Motor Vehicle Record (MVR) for your review.

Please confirm once this driver has been added to the policy and provide an updated certificate of insurance. If there are any changes to our premium as a result of this addition, please notify us as soon as possible.

Thank you for your assistance.

Sincerely,

[Your Name]
[Your Title]
[Company Name]
[Phone Number]