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

[Date]

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

Subject: Request to Add Temporary Driver to Policy #[Your Policy Number]

To Whom It May Concern,

I am writing to formally request the addition of a temporary driver to my existing automobile insurance policy, effective from [Start Date] to [End Date].

The details of the additional driver are as follows:

- Full Name: [Driver's Full Name]
- Date of Birth: [Driver's DOB]
- Driver's License Number: [License Number]
- State of Issuance: [State]
- Relationship to Policyholder: [e.g., Relative, Houseguest]

The reason for this temporary addition is [Reason, e.g., visiting for the holidays / house sitting]. This driver will primarily be operating the following vehicle on my policy: [Year, Make, and Model of Vehicle].

Please confirm once this change has been processed and inform me of any adjustments to my premium or if additional documentation is required.

Thank you for your assistance.

Sincerely,

[Your Signature]

[Your Printed Name]