[Date]

[Certificate Holder Name]
[Company Name]
[Street Address]
[City, State, Zip Code]

RE: Confirmation of Additional Insured Status

Dear [Contact Name],

This letter serves as formal confirmation that **[Entity Name]** has been added as an Additional Insured to our commercial property insurance policy, effective as of **[Effective Date]**.

Policy Details:

- **Insurance Carrier:** [Carrier Name]
- **Policy Number:** [Policy Number]
- **Property Address:** [Insured Property Address]
- **Coverage Period:** [Start Date] to [End Date]

This endorsement has been made in accordance with the requirements set forth in the [Lease/Contract] agreement dated [Date of Agreement]. The Additional Insured status applies specifically to [Liability/Property] claims arising out of the operations or occupancy at the aforementioned location.

Please find the attached Certificate of Insurance (COI) reflecting this change. If you require a copy of the specific policy endorsement or have any further questions, please contact our office at [Phone Number] or [Email Address].

Sincerely,

[Your Name]
[Your Title]
[Your Company Name]