

[Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

**Subject: Notification of Spouse Addition and Premium Adjustment**

Dear [Policyholder Name],

We are writing to confirm that your request to add your spouse, [Spouse Name], to your insurance policy (Policy Number: [Policy Number]) has been processed successfully.

The coverage for your spouse is effective as of [Effective Date].

Please be advised that the addition of a dependent has resulted in an adjustment to your premium. Your new premium details are as follows:

- **Previous Premium Amount:** \$[Amount]
- **New Premium Amount:** \$[Amount]
- **Adjustment Effective Date:** [Date]
- **Next Billing Date:** [Date]

Enclosed with this letter is your updated policy schedule and insurance ID card(s). We recommend reviewing these documents to ensure all information is correct.

If you have any questions regarding this adjustment or your coverage, please contact our customer service department at [Phone Number] or via email at [Email Address].

Thank you for choosing [Company Name].

Sincerely,

[Sender Name/Department]

[Company Name]