

[Company Name]
[Company Address]
[City, State, Zip Code]
[Phone Number]

[Date]

[Policyholder Name]
[Policyholder Address]
[City, State, Zip Code]

Subject: Confirmation of Policy Conversion - Policy Number: [New Policy Number]

Dear [Policyholder Name],

This letter confirms that your request to convert your Term Life Insurance policy ([Former Policy Number]) to a Universal Life Insurance policy has been successfully processed.

Your new coverage is effective as of [Effective Date]. Please find the details of your new Universal Life policy below:

- **New Policy Number:** [Number]
- **Face Amount:** \$[Amount]
- **Premium Amount:** \$[Amount]
- **Payment Frequency:** [Monthly/Quarterly/Annual]
- **Beneficiary on Record:** [Beneficiary Name(s)]

As a Universal Life policyholder, your coverage now includes a cash value component that has the potential to grow over time based on current interest rates. You also have increased flexibility regarding premium payments and death benefits, subject to policy terms.

Attached to this letter is your new policy document. We encourage you to review it thoroughly and store it in a safe place. Your previous Term Life policy is now considered closed and is no longer in force.

If you have any questions regarding your new policy or wish to make further adjustments, please contact your agent at [Agent Phone Number] or call our customer service department at [Customer Service Number].

Thank you for choosing [Company Name] for your life insurance needs.

Sincerely,

[Sender Name]
[Title]
[Company Name]