[Date]

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

Subject: Confirmation of Change in Class of Use

Dear [Name],

This letter confirms that we have successfully updated the Class of Use for your insurance policy, number [Policy Number], effective [Effective Date].

As per your request, the classification has been changed from **Personal Use** to **Commercial Use**. This change ensures that your vehicle/property is correctly covered while being used for business purposes.

Summary of Changes:

- Previous Class: Personal
- New Class: Commercial
- Updated Premium Amount: [Amount]
- Next Payment Date: [Date]

Please find the enclosed updated policy documents reflecting this change. We recommend reviewing the terms and conditions to ensure the coverage limits meet your business requirements.

If you have any questions or did not authorize this change, please contact us immediately at [Phone Number] or [Email Address].

Thank you for choosing [Insurance Company Name].

Sincerely,

[Sender Name]
[Title]
[Insurance Company Name]