[Company Name]
[Department]
[Address]
[City, State, Zip Code]

[Date]

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

Re: Policy Number: [Policy Number]

Dear [Customer Name],

Thank you for providing your annual mileage update for the period of [Year]. We have successfully received and processed your information.

Based on the details provided, your recorded annual mileage is: **[Mileage Amount] miles**.

This update ensures that your policy remains accurate and that you are receiving the appropriate coverage and rate based on your actual driving habits. Please note that this update may result in a change to your premium. If a change occurs, a revised billing statement or policy endorsement will be sent to you separately.

If any of the information above is incorrect, or if your driving circumstances change significantly during the year, please contact us at [Phone Number] or [Email Address].

Thank you for choosing [Company Name].

Sincerely,

[Name/Signature]
[Title]
[Company Name]