

[Date]

[Insured Name]
[Address Line 1]
[Address Line 2]
[City, State, Zip Code]

RE: Policy Number: [Policy Number]
Subject: Delivery of Policy Endorsement and Updated Declaration Page

Dear [Insured Name],

Please find enclosed the updated Declaration Page and Endorsement(s) for your insurance policy referenced above.

These documents reflect the recent changes made to your coverage effective as of [Effective Date]. Specifically, these updates include:

- [Description of Change 1]
- [Description of Change 2]

We recommend that you review these documents carefully and file them with your original policy records. Please note any changes to your premium amount or billing schedule as outlined in the attached documents.

If you have any questions regarding these updates or your coverage in general, please contact our office at [Phone Number] or via email at [Email Address].

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

Sincerely,

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

Enclosures: Updated Declaration Page, Endorsement(s) [Form Number(s)]