[Date]

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

RE: Renewal of Commercial General Liability Policy
Policy Number: [Policy Number]
Effective Date: [Renewal Date]

Dear [Client Name],

Thank you for choosing to renew your Commercial General Liability insurance with [Agency/Company Name]. We appreciate your continued business and the opportunity to serve your insurance needs.

Please find the enclosed renewal policy documents. We recommend that you review these documents carefully to ensure that the coverage limits, deductibles, and named insured information accurately reflect your current business operations.

Important Reminders:

- Store these documents in a secure location.
- Review the updated Summary of Coverages.
- Please notify us immediately if there have been any significant changes to your business activities or locations.

If you have any questions regarding your coverage or if you would like to discuss additional protection for your business, please contact our office at [Phone Number] or via email at [Email Address].

Sincerely,

[Your Name]
[Your Title]
[Agency Name]

Enclosure: Policy Documents