

[Date]

[Client Name]

[Client Address]

[City, State, Zip Code]

RE: Delivery of Insurance Binder and Policy Documents

Dear [Client Name],

Thank you for choosing [Agency Name] for your insurance needs. We are pleased to confirm that your coverage is now in effect.

Please find the following documents enclosed for your records:

- Insurance Binder (Temporary Proof of Coverage)
- Official Policy Copy
- Certificate of Insurance (if applicable)
- Invoice/Premium Summary

Policy Details:

- **Policy Type:** [Type, e.g., Auto/Home/General Liability]
- **Policy Number:** [Policy Number]
- **Effective Date:** [Start Date]
- **Expiration Date:** [End Date]

We recommend that you review these documents carefully to ensure all information is accurate. Please store them in a safe place, as you may need to reference them in the event of a claim.

If you have any questions regarding your coverage or if any corrections are needed, please contact our office at [Phone Number] or [Email Address].

We appreciate your business and look forward to serving you.

Sincerely,

[Agent Name]

[Title]

[Agency Name]