

[Date]

[Insured Name]

[Insured Address]

[City, State, Zip Code]

RE: Policy Number: [Policy Number] - Commercial Fine Art Specialty Coverage

Dear [Name of Insured/Representative],

Enclosed please find your Commercial Fine Art Specialty insurance policy. We recommend that you review this document thoroughly to ensure the scheduled items and limits are accurate.

Please take particular note of the **Transit Damage Exclusion** included in your policy. As discussed during the underwriting process, this policy does not provide coverage for physical loss or damage sustained while items are in transit or during the loading/unloading process.

To finalize the issuance of this policy, we require your formal acknowledgement of this limitation. Please sign and return the statement below at your earliest convenience.

ACKNOWLEDGEMENT OF TRANSIT DAMAGE EXCLUSION

I, the undersigned, hereby acknowledge that I have received Policy Number [Policy Number]. I understand and agree that this policy contains an **Exclusion for Transit Damage**. I recognize that there is no coverage for damage to the scheduled fine art while it is being moved, shipped, or transported between locations.

Authorized Signature (Insured)

Printed Name and Title

Date

Sincerely,

[Agent/Broker Name]

[Agency Name]