

[Date]

[Client Name]

[Client Company Name]

[Client Address]

[City, State, Zip Code]

Subject: Insurance Quote for Commercial Delivery Fleet Expansion

Dear [Client Name],

Thank you for requesting a quotation for the expansion of your commercial delivery fleet. Based on the vehicle specifications and driver information provided, we are pleased to offer the following insurance proposal.

1. Fleet Details

Total New Vehicles: [Number of Units]

Vehicle Type: [e.g., Light Cargo Vans / Heavy Trucks]

Usage: [e.g., Last-Mile Delivery / Long-Haul]

2. Coverage Limits

Combined Single Limit (Liability): \$[Amount]

Comprehensive & Collision Deductible: \$[Amount]

Cargo Insurance: \$[Amount]

Uninsured/Underinsured Motorist: \$[Amount]

3. Premium Summary

Annual Premium (Expansion Units): \$[Amount]

Total Estimated Fleet Premium: \$[Amount]

Payment Plan: [e.g., Monthly / Quarterly / Full Payment]

4. Key Conditions

- Coverage is subject to MVR (Motor Vehicle Record) verification for all new drivers.
- Inclusion of GPS tracking/Telematics discount: [Yes/No]
- Quote Validity: This quote is valid until [Date].

To bind coverage or to discuss adjustments to these limits, please contact our office at [Phone Number] or via email at [Email Address].

We look forward to supporting your business growth.

Sincerely,

[Agent Name]

[Title]

[Insurance Agency Name]