

[Date]

[Client Name]

[Client Address]

[City, State, Zip Code]

Subject: Welcome - Commercial General Liability Coverage Overview

Dear [Client Name],

Thank you for choosing [Insurance Agency/Company Name] for your business insurance needs. We are pleased to confirm that your Commercial General Liability (CGL) policy is now active under policy number [Policy Number].

Your CGL policy provides essential protection against liability claims for bodily injury and property damage arising out of your business operations. Below is a brief overview of your coverage components:

- **Bodily Injury and Property Damage:** Coverage for losses for which your business is legally liable.
- **Personal and Advertising Injury:** Protection against offenses such as libel, slander, or copyright infringement.
- **Medical Payments:** Coverage for medical expenses for injuries sustained by non-employees on your premises.
- **Products and Completed Operations:** Protection against liability arising out of products sold or work completed by your business.

Policy Period: [Start Date] to [End Date]

Limits of Liability: [Limit Amount per Occurrence / Aggregate Limit]

Please review your enclosed policy documents thoroughly to understand your specific terms, conditions, and exclusions. We recommend keeping these documents in a secure location.

If you need to report a claim, please contact our claims department at [Phone Number] or [Email Address] as soon as possible.

We appreciate your business and look forward to serving you. If you have any questions regarding your coverage, please contact your agent at [Agent Phone Number].

Sincerely,

[Agent Name/Signature]

[Title]

[Company Name]