

[Date]

[Insured Name]
[Business Name]
[Address Line 1]
[City, State, Zip Code]

Re: Policy Number: [Policy Number]

Dear [Insured Name],

Welcome to [Insurance Agency/Company Name]. We are pleased to provide your Commercial General Liability insurance coverage.

Enclosed you will find your welcome packet, which contains your policy documents, coverage summary, and certificates of insurance. Please review these documents carefully to ensure all business information is accurate.

This policy provides protection for your business against claims of bodily injury, property damage, and personal injury. To maintain your coverage, please note the following important details:

- **Policy Period:** [Start Date] to [End Date]
- **Premium Due Date:** [Date]
- **Claims Reporting:** In the event of an incident, please contact us immediately at [Phone Number] or [Email].

We are committed to supporting your business and helping you manage your risks effectively. If you have any questions regarding your coverage or need to request additional certificates, please do not hesitate to contact your agent, [Agent Name], at [Agent Phone].

Thank you for choosing [Insurance Agency/Company Name] for your commercial insurance needs.

Sincerely,

[Signature]
[Name of Sender]
[Title]
[Company Name]