

[Company Name]
[Company Address]
[City, State, Zip Code]
[Phone Number]
[Email Address]

[Date]

[Client Name]
[Client Address]
[City, State, Zip Code]

Dear [Client Name],

Welcome to [Company Name]! Thank you for choosing us to protect you and your motorcycle. We are excited to have you as a new policyholder.

Your policy details are as follows:

- **Policy Number:** [Policy Number]
- **Effective Date:** [Effective Date]
- **Insured Vehicle:** [Year, Make, and Model of Motorcycle]

Enclosed with this letter, you will find your insurance identification cards and your policy documents. Please review these materials carefully to ensure all information is correct and to familiarize yourself with your coverage limits and benefits.

If you need to make any changes to your policy, file a claim, or if you have any questions regarding your coverage, please do not hesitate to contact our customer service team at [Phone Number] or visit our website at [Website URL].

Ride safely and thank you for trusting us with your insurance needs.

Sincerely,

[Signature]
[Agent Name/Department Name]
[Company Name]