

[Date]

[Client Name]

[Company Name]

[Address Line 1]

[City, State, Zip Code]

**Subject: Welcome to Your Commercial Fleet Insurance Policy - Policy #[Policy Number]**

Dear [Client Contact Name],

Welcome to [Insurance Agency/Company Name]. We are pleased to confirm that your Commercial Fleet Auto Policy is now active. Thank you for choosing us to protect your business vehicles and drivers.

Enclosed in this package, you will find:

- Your Policy Declaration Page
- Insurance Identification Cards for all scheduled vehicles
- Claims reporting procedures and emergency contact numbers
- A schedule of covered drivers

**Important Reminders:**

- **ID Cards:** Please ensure that a current insurance card is placed in every vehicle in your fleet immediately.
- **Driver Changes:** Please notify us before allowing any new employees to operate fleet vehicles so we can verify coverage.
- **Maintenance:** Regular vehicle inspections are recommended to maintain safety standards and policy compliance.

Should you need to make changes to your fleet, add drivers, or file a claim, please contact your dedicated agent, [Agent Name], at [Phone Number] or via email at [Email Address].

We look forward to a long-standing partnership and helping your business grow safely.

Sincerely,

[Your Name]

[Your Title]

[Insurance Agency/Company Name]