[Date]

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

Dear [Client Name],

Welcome to [Firm Name]. We are pleased to confirm that you have selected our firm to represent your interests regarding professional liability insurance matters.

Our Professional Liability Practice is dedicated to protecting the reputations and assets of professionals. We understand the complexities of your industry and are committed to providing you with strategic risk management and robust legal defense.

Your primary point of contact will be [Lead Attorney/Account Manager Name], who can be reached directly at [Phone Number] or [Email Address].

To begin our partnership, we have enclosed the following documents for your review and signature:

- Engagement Agreement
- Initial Information Request Form
- Privacy and Confidentiality Policy

We look forward to working with you and providing the specialized support you require. Thank you for placing your trust in our firm.

Sincerely,

[Your Name]
[Your Title]
[Firm Name]