

[Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

**Subject: Action Required: Vehicle Schedule Update for Commercial Auto Renewal**

Dear [Policyholder Name],

Your commercial auto insurance policy, [Policy Number], is scheduled for renewal on [Renewal Date]. To ensure your fleet has continuous and accurate coverage, we require an updated vehicle schedule.

Please review the attached list of currently insured vehicles and provide the following updates:

- Identify any vehicles that have been sold or removed from the fleet.
- List any new vehicles to be added (include Year, Make, Model, and full VIN).
- Update the primary garage location for each vehicle if it has changed.
- Provide current mileage or estimated annual radius of operation for each unit.

Please return the updated schedule to our office by [Due Date] to avoid any delays in the renewal process or inaccuracies in your premium calculation.

If you have any questions regarding your fleet or the renewal process, please contact [Account Manager Name] at [Phone Number] or [Email Address].

Sincerely,

[Sender Name]

[Company Name]

[Title]