

[Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

**Subject: Approval of Agreed Value Increase - Policy #[Policy Number]**

Dear [Policyholder Name],

We are pleased to inform you that your request to increase the Agreed Value for the vehicle listed below has been reviewed and approved.

**Vehicle Details:**

Year: [Year]

Make: [Make]

Model: [Model]

VIN: [VIN]

**Valuation Update:**

Previous Agreed Value: \$[0,000.00]

New Approved Agreed Value: \$[0,000.00]

Effective Date: [Date]

This adjustment ensures that your classic vehicle is protected based on its current market appreciation and documented condition. Please find the enclosed updated Policy Declarations page reflecting this change and the revised premium amount.

If you have any questions regarding this endorsement or your coverage, please contact your agent or our customer service department at [Phone Number].

Thank you for choosing [Insurance Company Name] to protect your classic investment.

Sincerely,

[Name/Signature]

[Title]

[Insurance Company Name]