

[Date]

[Client Name]

[Client Address]

[City, State, Zip Code]

Subject: Acknowledgment of Professional Liability Insurance Renewal

Dear [Client Name],

This letter serves as formal acknowledgment that we have received and processed your request to renew your Professional Liability Insurance policy.

Policy Details:

- **Policy Number:** [Policy Number]
- **Insurance Carrier:** [Carrier Name]
- **Renewal Period:** [Start Date] to [End Date]
- **Coverage Limit:** [Limit Amount]

Your updated policy documents and certificate of insurance are attached to this letter. We recommend reviewing these documents carefully to ensure all information is accurate and that the coverage meets your current professional requirements.

If there have been any significant changes to your business operations or if you have any questions regarding your coverage, please contact us immediately at [Phone Number] or [Email Address].

Thank you for your continued trust in our services.

Sincerely,

[Your Name/Signature]

[Your Title]

[Company Name]