

[Date]

[Policyholder Name]

[Address Line 1]

[City, State, Zip Code]

**Subject: Confirmation of Coverage for Teen Driver - Policy #[Policy Number]**

Dear [Policyholder Name],

Thank you for contacting [Insurance Agency Name] to add a new driver to your auto insurance policy. We are pleased to confirm that [Teen Driver Name] has been successfully added as a covered driver effective [Effective Date].

Attached to this letter, you will find your updated policy declarations page and new insurance identification cards. Please ensure that a copy of the new insurance card is placed in the vehicle that [Teen Driver Name] will be operating.

We appreciate you choosing us to protect your family during this exciting milestone. Safety is our top priority, so we have also enclosed a "Teen Driver Safety Guide" with tips to help your new driver stay safe on the road.

If you have any questions regarding your premium changes, coverage limits, or available safe-student discounts, please feel free to call us at [Phone Number] or email [Email Address].

Thank you for your continued trust and business.

Sincerely,

[Agent Name]

[Agency Name]