

[Date]

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

Dear [Client Contact Name],

Thank you for choosing [Insurance Agency/Company Name] for your commercial insurance needs. We are pleased to welcome [Business Name] as a new policyholder and appreciate the trust you have placed in us to protect your business.

Enclosed you will find your policy documentation, including your declarations page and certificates of insurance. We encourage you to review these documents to ensure all details regarding your coverage are accurate.

**Policy Details:**

- **Policy Number:** [Policy Number]
- **Effective Date:** [Start Date]
- **Coverage Type:** [Type of Insurance]

As your dedicated insurance partner, we are committed to providing you with excellent service. Whether you have questions about your coverage, need to report a claim, or wish to update your policy information, our team is here to assist you.

You can reach us at [Phone Number] or via email at [Email Address]. Our office hours are [Business Hours].

We look forward to a long and successful partnership with [Business Name].

Sincerely,

[Your Name]  
[Your Title]  
[Insurance Agency/Company Name]