Transport Fleet Insurance Renewal Feedback

Date: [Insert Date]

To: [Insurance Company Name]

From: [Your Company Name]

Subject: Feedback on Transport Fleet Insurance Renewal

Dear [Insurance Agent's Name],

We would like to express our gratitude for your assistance in the renewal of our transport fleet insurance policy. After careful review of the terms and coverage options provided, we have some feedback and queries regarding the renewal process.

1. **Coverage Options:** We appreciate the comprehensive coverage options you provided. However, we would like to know more about the exclusions related to specific vehicle types.

2. **Premium Rates:** The premium rates seem competitive; however, we would like to discuss possible discounts for our long-standing relationship.

3. **Claims Process:** We would also appreciate more information regarding the claims process, particularly the response times and documentation required.

We are looking forward to your prompt response so we can proceed with the renewal effectively. Thank you for your continued support and partnership.

Sincerely,

[Your Name]

[Your Position]

[Your Company Name]

[Contact Information]