

Date: [Insert Date]

[Your Name]  
[Your Position]  
[Your Company]  
[Your Address]  
[City, State, Zip Code]

[Recipient Name]  
[Recipient Position]  
[Recipient Company]  
[Recipient Address]  
[City, State, Zip Code]

Dear [Recipient Name],

I hope this message finds you well. I am writing to inquire about the possibility of adding [Additional Insured Name] as additional insured on our current certificate of insurance.

Given our ongoing projects and the importance of ensuring appropriate coverage, it is crucial for us to have this modification in place. Please let us know the steps necessary to complete this process and any documentation you may require from our side.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,  
[Your Signature (if sending a hard copy)]  
[Your Name]  
[Your Position]  
[Your Contact Information]