

Notification of Policy Changes

Date: [Insert Date]

Policyholder Name: [Insert Name]

Policy Number: [Insert Policy Number]

Dear [Policyholder Name],

We are writing to inform you of important changes to your insurance policy (Policy Number: [Insert Policy Number]) effective [Insert Effective Date].

Summary of Changes:

- Change 1: [Description of Change 1]
- Change 2: [Description of Change 2]
- Change 3: [Description of Change 3]

If you have any questions or concerns regarding these changes, please do not hesitate to contact us at [Insert Contact Information].

Thank you for being a valued customer.

Sincerely,

[Your Company Name]

[Your Company Address]