

# Advisory for Coverage Area Expansion/Contraction

Date: [Insert Date]

To: [Recipient's Name]

From: [Your Name]

Subject: Advisory for Coverage Area Expansion/Contraction

Dear [Recipient's Name],

We would like to inform you about the recent developments regarding our coverage area, which will be effective as of [Effective Date]. After careful consideration and analysis, we have decided to [expand/constrict] our service coverage in the following areas:

## New Coverage Area

- [Area 1]
- [Area 2]
- [Area 3]

## Area Being Constricted

- [Area A]
- [Area B]

We believe that these changes will [provide better service/improve efficiency/etc.]. We appreciate your understanding and support during this transition period.

If you have any questions or concerns, please do not hesitate to reach out to us at [Contact Information].

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Position]

[Your Company]