Supplier Trade Credit Insurance Endorsement

[Your Contact Information]

Date: [Insert Date] [Supplier's Name] [Supplier's Address] [City, State, ZIP Code] Attn: [Contact Person's Name] Dear [Contact Person's Name], We are pleased to inform you that we have endorsed our trade credit insurance policy to provide coverage for our transactions with [Supplier's Company Name]. This endorsement will ensure that our business relationship is protected against potential credit risks. Details of the endorsement are as follows: **Policy Number:** [Insert Policy Number] Coverage Limit: [Insert Coverage Limit] • **Effective Date:** [Insert Effective Date] **Expiration Date:** [Insert Expiration Date] Please keep this letter for your records and do not hesitate to contact us if you have any questions or require further information. Thank you for your continued partnership. Sincerely, [Your Name] [Your Title] [Your Company Name] [Your Company Address] [City, State, ZIP Code]