

# Insurance Policy Confirmation

Date: [Insert Date]

Dear [Insured Name],

We are pleased to confirm your insurance policy for personal coverage. Please find the details of your policy below:

## Policy Details

- Policy Number: [Insert Policy Number]
- Effective Date: [Insert Effective Date]
- Expiration Date: [Insert Expiration Date]
- Coverage Amount: [Insert Coverage Amount]
- Premium: [Insert Premium Amount]

If you have any questions regarding your policy or coverage, please do not hesitate to contact us at [Insert Contact Information].

Thank you for choosing [Insurance Company Name].

Sincerely,

[Your Name]

[Your Title]

[Insurance Company Name]

[Contact Information]