

Auto Insurance Coverage Affirmation

Date: [Insert Date]

To Whom It May Concern,

I, [Your Name], am writing to confirm that I have accepted auto insurance coverage with [Insurance Company Name].

The details of my coverage are as follows:

- Policy Number: [Insert Policy Number]
- Coverage Start Date: [Insert Start Date]
- Vehicle Insured: [Insert Vehicle Description]
- Coverage Amount: [Insert Coverage Amount]

Please let me know if you require any further information.

Thank you.

Sincerely,

[Your Name]

[Your Address]

[Your Phone Number]

[Your Email Address]