

Insurance Payment Frequency Update

Dear [Policyholder's Name],

We are writing to inform you about an important update regarding your insurance policy.

Effective [Effective Date], the payment frequency for your insurance premiums will be altered from [Current Frequency] to [New Frequency]. This change is made to enhance your payment experience and provide more flexibility in managing your finances.

If you have any questions or require further clarification regarding this change, please do not hesitate to contact our customer service department at [Customer Service Phone Number] or [Customer Service Email Address].

Thank you for your continued trust in us.

Sincerely,

[Your Name]

[Your Position]

[Company Name]

[Company Contact Information]