

Date: \_\_\_\_\_

To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RE: Additional Insured on Policy # \_\_\_\_\_

Property Address: \_\_\_\_\_  
\_\_\_\_\_

To whom it may concern,

Please be informed that Beyond The Lease Realty, LLC is managing the property located at the address above.

Beyond The Lease Realty, LLC requires that, upon our signing of the Residential Property Management Agreement, they be listed as an additional insured on our policy and a copy be sent to them at:

Beyond The Lease Realty, LLC  
8700 Manchaca, Ste. 703  
Austin, TX 78748  
info@btlease.com

Should you have any questions or concerns regarding this matter, please feel free to contact me at anytime.

Sincerely,

Contact #: \_\_\_\_\_