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# Dental Office Relocation Letter

[Dental Office Letterhead]

[Date]

Subject: Dental Office Relocation: Exciting News for Our Patients

Dear [Patient's Name],

We are delighted to share that [Your Dental Office Name] will be moving to a new location soon! This change reflects our commitment to providing our patients with the best possible dental care in a more comfortable and state-of-the-art environment.

## **New Office Address:**

[New Dental Office Address Line 1]

[New Dental Office Address Line 2]

[City, State, Zip Code]

## **Why We're Relocating**

The new location is designed to offer a more welcoming atmosphere and is equipped with the latest dental technology, enabling us to provide enhanced services for all our patients. We have also expanded our treatment rooms, added better waiting area facilities, and improved parking accessibility.

## **Key Details for Patients:**

- **Last Day at Current Location:** [Last Working Day]
- **New Office Operational From:** [Reopening Date]
- **New Contact Details (if changed):** [Phone Number/Email Address]

- **Appointment Bookings:** All previously scheduled appointments after [Reopening Date] will be at the new location. If you need to reschedule, please call [Appointment Contact].

### **What You Need to Know:**

Our team will be available to assist you with any questions or concerns during this transition. Additionally, we will send reminders and directions to our new location before your next appointment.

We sincerely appreciate your trust and look forward to welcoming you to our new dental office!

Yours sincerely,

[Your Name]

[Your Position]

[Your Contact Information]