[Company Letterhead]

[Date]

[Employee Name]
[Employee Address]
[City, State, Zip Code]

Subject: Notification of Position Elimination and Severance Offer

Dear [Employee Name],

Please be advised that due to [reason for elimination, e.g., corporate restructuring], your position as [Job Title] is being eliminated, effective [End Date].

In connection with this separation, [Company Name] is offering you a severance package. This offer is contingent upon your signing and returning this agreement, including the non-compete provisions outlined below.

1. Severance Payment
The Company will provide you with a severance payment in the gross amount of $[Amount], less applicable taxes and withholdings. This payment will be made in [a lump sum / bi-weekly installments] starting [Date].

2. Benefits
Your health insurance coverage will continue through [Date]. After this period, you will be eligible for COBRA continuation coverage.

3. Non-Compete Agreement
By accepting this severance, you agree that for a period of [Number] months following your termination date, you will not, directly or indirectly, engage in, consult for, or be employed by any business that competes with [Company Name] within [Geographic Area].

4. Confidentiality and Non-Solicitation
You agree to maintain the confidentiality of all proprietary company information. Additionally, for a period of [Number] months, you agree not to solicit employees or clients of [Company Name].

5. Release of Claims
By signing this letter, you release [Company Name] from any and all claims, grievances, or liabilities related to your employment or its termination.

6. Return of Property
Please return all company equipment (laptop, keys, badges) by [Date].

You have until [Date] to review and sign this agreement. We recommend you consult with legal counsel before signing.

Sincerely,

[Signature]
[Name of Authorized Representative]
[Title]

Acknowledgment and Acceptance:

I, [Employee Name], accept the terms of this Severance Agreement and Non-Compete Condition.

Signature: _____ Date: _____