

[Date]

[Policyholder Name]

[Mailing Address]

[City, State, Zip Code]

Subject: GRACE PERIOD NOTICE - Policy Number: [Policy Number]

Dear [Policyholder Name],

This is a reminder that we have not yet received the premium payment for your homeowners insurance policy, which was due on [Original Due Date].

Your policy is currently within its **[Number of Days]-day grace period**. To ensure your home remains fully protected and to avoid any lapse in coverage, please submit your payment of **[\$[Total Amount Due]** by **[Grace Period End Date]**.

Payment Options:

- **Online:** Visit [Website URL] to pay via credit card or bank transfer.
- **Phone:** Call our automated payment line at [Phone Number].
- **Mail:** Send a check to [Payment Mailing Address].

Please note that if payment is not received by the end of the grace period, your policy will be canceled effective [Cancellation Date/Time], and you may be at risk for a gap in coverage.

If you have already sent your payment, please disregard this notice. If you are experiencing financial hardship or have questions regarding your bill, please contact our customer service department at [Customer Service Phone Number].

Sincerely,

[Your Name/Company Name]

[Department Name]

[Contact Information]