

[Company Name]
[Company Address]
[City, State, Zip Code]
[Phone Number]

[Date]

[Policyholder Name]
[Mailing Address]
[City, State, Zip Code]

RE: Notice of Policy Reinstatement

Policy Number: [Policy Number]
Property Address: [Insured Property Address]
Effective Date of Reinstatement: [Date]

Dear [Policyholder Name],

We are pleased to confirm that your homeowners property insurance policy has been reinstated. Your coverage is now active and in full force as of [Date] at [Time].

This reinstatement follows our receipt of [the required payment / requested documentation]. There has been no lapse in coverage, provided all terms and conditions of the policy continue to be met.

Please keep this letter with your insurance records as proof of continuous coverage. If you have any questions regarding your policy or future premium payments, please contact your agent or our customer service department at [Phone Number].

Thank you for choosing [Company Name] for your property protection needs.

Sincerely,

[Sender Name/Department]
[Company Name]