

[Date]

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

RE: NOTICE OF CANCELLATION OF PROFESSIONAL LIABILITY INSURANCE

Policy Number: [Policy Number]
Effective Date of Cancellation: [Cancellation Date]

Dear [Policyholder Name],

Please be advised that your professional liability insurance policy referenced above is hereby cancelled effective [Time] on [Date].

This action is being taken due to the material misrepresentation and/or nondisclosure of your professional liability claim history on your application dated [Application Date]. Specifically, our underwriting department has identified the following undisclosed incidents or claims:

- [Description of Undisclosed Item 1]
- [Description of Undisclosed Item 2]

Had this information been accurately disclosed at the time of application, this company would not have issued the policy under the current terms or premiums. Consequently, the policy is being terminated in accordance with the terms and conditions outlined in your policy contract and state regulations.

Any unearned premium will be refunded to you under separate cover or credited to your broker of record within [Number] days.

We recommend that you secure alternative coverage immediately to avoid any lapse in professional liability protection.

Sincerely,

[Name of Authorized Representative]
[Title]
[Insurance Company Name]

cc: [Broker/Agent Name]