

[Date]

[Insured Name]
[Address Line 1]
[Address Line 2]
[City, State, Zip Code]

RE: NOTICE OF CANCELLATION

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

Dear [Insured Name],

We are writing to formally notify you that your personal umbrella liability policy listed above will be canceled effective [Time] on [Date].

This action is being taken due to material misrepresentation regarding your underlying insurance coverage. Specifically, it has been determined that:

[Insert specific details, e.g., The underlying auto/homeowners liability limits are lower than required / The underlying policy has been canceled or is non-existent.]

As stated in your policy conditions, the maintenance of specific underlying insurance limits is a requirement for this umbrella coverage to remain in effect. The discrepancy identified significantly alters the risk profile originally accepted at the time of application.

Any unearned premium will be refunded to you under separate cover or credited to your account according to the terms of your policy.

We recommend that you contact your insurance agent immediately to secure alternative coverage to avoid any gap in your liability protection.

Sincerely,

[Name of Company Official]
[Title]
[Insurance Company Name]