

**DATE:** [Insert Date]

**TO:**

[Insured Name]

[Business Address]

[City, State, Zip Code]

**RE: FINAL NOTICE OF PENDING CANCELLATION**

**Policy Type:** Commercial General Liability

**Policy Number:** [Insert Policy Number]

**Effective Dates:** [Insert Policy Period]

Dear [Insured Name/Contact Person],

This letter serves as a formal final warning regarding the status of your Commercial General Liability insurance policy. Our records indicate that the following requirement has not been met:

- [ ] Non-payment of premium in the amount of: \$[Insert Amount]
- [ ] Failure to provide requested underwriting documentation: [Insert Description]
- [ ] Failure to comply with safety recommendations/loss control audit: [Insert Description]

**NOTICE OF CANCELLATION DATE:**

If the above issue is not resolved by **[Insert Deadline Date]** at 12:01 AM, your insurance coverage will be officially cancelled effective immediately on that date. There will be no further grace period.

**CONSEQUENCES OF CANCELLATION:**

- A lapse in coverage may result in a breach of your lease or client contracts.
- Future insurance applications may be subject to higher premiums due to a history of cancellation.
- Any claims occurring after the cancellation date will not be covered.

To prevent the cancellation of your policy, you must [Insert Action Required, e.g., submit payment/send documents] before the deadline stated above.

If you have already addressed this matter, please contact our office immediately at [Insert Phone Number] to confirm receipt and ensure your policy remains active.

Sincerely,

[Your Name/Representative Name]

[Your Title]

[Insurance Agency/Company Name]