

[Your Company Name/Insurance Agency]
[Street Address]
[City, State, Zip Code]
[Date]

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

RE: NOTICE OF CANCELLATION OF MARINE INSURANCE POLICY

Policy Number: [Policy Number]
Vessel Name: [Vessel Name]
HULL/ID Number: [HIN or Registration Number]

Dear [Policyholder Name],

Please be advised that your marine insurance coverage for the vessel referenced above is hereby cancelled effective **[Date of Cancellation]** at 12:01 A.M. local time.

This action is being taken due to your failure to comply with the policy terms regarding the provision of required safety documentation. Specifically, we have not received the following:

- [Name of Missing Certification, e.g., Marine Survey / Coast Guard Safety Certificate]

As per the conditions of your policy, the maintenance of valid safety certifications is a mandatory requirement for continued coverage. Without these documents, we are unable to verify the seaworthiness of the vessel or the risk level associated with the policy.

Any unearned premium will be refunded to you under separate cover, calculated on a [Pro-rata/Short-rate] basis.

If you provide the required certification prior to the effective date of cancellation, we may be able to rescind this notice. Please contact your agent immediately at [Phone Number] if you have any questions or to submit the documents.

Sincerely,

[Signature]
[Name of Underwriter/Representative]
[Title]