

[Agency Name]
[Agency Address]
[City, State, Zip Code]
[Phone Number]
[Date]

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

RE: Notice of Territory Withdrawal and Policy Cancellation

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

Dear [Policyholder Name],

We are writing to formally notify you that [Insurance Company/Agency Name] has made the strategic decision to withdraw its insurance services from your specific geographic territory. As a result of this withdrawal, we will no longer be providing coverage in your area.

Please be advised that your policy [Policy Number] will be cancelled effective [Time] on [Date]. Your coverage will remain in force until this date, provided all premium payments are kept current.

What this means for you:

- Your current coverage will cease on the effective date listed above.
- Any unearned premium paid beyond the cancellation date will be refunded to you within [Number] business days.
- You must secure alternative insurance coverage before [Date] to avoid any lapse in protection.

We recommend contacting an independent insurance broker or visiting your state's Department of Insurance website to find alternative carriers currently operating in your region.

If you have any questions regarding this notice or the status of your final premium refund, please contact our customer service department at [Phone Number] or [Email Address].

Thank you for your past business, and we regret any inconvenience this market withdrawal may cause.

Sincerely,

[Signature]
[Name of Agency Representative]
[Title]