Date: [Insert Date]

To: [Policyholder Name / Company Name]
Address: [Insert Address]
Policy Number: [Insert Policy Number]

Subject: Notice of Insurance Policy Termination

Dear [Name of Contact Person],

This letter serves as formal notification that [Insurance Company Name] will be terminating your [Type of Insurance, e.g., General Liability] policy effective [Termination Date].

This decision has been made following a review of your file regarding the safety recommendations issued on [Date of Original Recommendation]. Our records indicate that despite multiple requests for compliance, the following safety requirements remain unaddressed:

- [Description of Safety Issue 1]
- [Description of Safety Issue 2]

As these recommendations were necessary to mitigate risk to an acceptable level, the failure to implement these changes constitutes a material increase in risk. Consequently, we can no longer provide coverage under the current terms.

Your coverage will remain in effect until 11:59 PM on [Termination Date]. We recommend that you secure alternative insurance coverage immediately to avoid any lapse in protection.

If you have any questions or have documentation proving the safety measures have been completed, please contact us at [Phone Number] or [Email Address] before [Deadline Date].

Sincerely,

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