

[Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

Subject: Reinstatement of Policy #[Policy Number]

Dear [Policyholder Name],

We are pleased to inform you that your insurance policy, which was previously cancelled due to non-payment of premium, has been officially reinstated.

We have successfully processed your payment of \$[Amount Paid] received on [Date]. Your coverage is now active with no lapse in protection, effective as of [Effective Date].

To ensure your coverage remains uninterrupted in the future, please ensure that all subsequent premiums are paid by their respective due dates. Your next payment of \$[Next Amount] is due on [Next Due Date].

If you have any questions regarding your billing or policy status, please contact our customer service department at [Phone Number] or via email at [Email Address].

Thank you for choosing [Insurance Company Name].

Sincerely,

[Sender Name]

[Title]

[Insurance Company Name]