NOTICE OF CANCELLATION FOR NON-PAYMENT OF PREMIUM

Date: [Insert Date]

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

Re: Homeowners Insurance Policy Number: [Insert Policy Number]

Dear [Policyholder Name],

This letter serves as formal notice that your homeowners insurance policy listed above is being cancelled due to non-payment of the premium.

The cancellation will be effective as of: **[Insert Cancellation Date and Time, e.g., 12:01 AM on Month Day, Year]**.

Our records indicate that we have not received the required payment of $[Insert Amount Due]. As a result, all coverage under this policy will cease on the effective date and time specified above.

If you wish to prevent this cancellation and maintain your coverage, we must receive the full payment of $[Insert Amount Due] no later than [Insert Deadline Date].

If payment has already been sent, please contact our billing department immediately at [Insert Phone Number] to confirm receipt and verify the status of your policy.

Please be advised that maintaining continuous homeowners insurance is often a requirement of your mortgage agreement. We recommend contacting your mortgage lender to inform them of this change in status.

Sincerely,

[Name of Insurance Company]
[Department Name]
[Contact Phone Number]