

Date: [Insert Date]

To: [Contact Name]
[Insurance Agency or Company Name]
[Address]
[City, State, Zip Code]

Subject: NOTICE OF MISSING NON-CONTRIBUTORY ENDORSEMENT

Dear [Contact Name],

We are writing to notify you that our recent audit of the insurance documentation provided for **[Policyholder Name]** under Policy Number **[Policy Number]** is incomplete.

Specifically, we are missing the formal **Primary and Non-Contributory Endorsement**. While the Certificate of Insurance indicates this coverage is in place, we require the actual endorsement page issued by the carrier to satisfy our compliance requirements.

Please provide the missing endorsement for the following coverage types:

- General Liability
- [Additional Coverage if applicable, e.g., Umbrella/Excess Liability]

The endorsement must explicitly state that the coverage provided to [Your Company Name / Additional Insured Name] is primary and non-contributory with respect to any other insurance available to us.

Please forward the requested document to **[Email Address]** or upload it to our portal no later than **[Due Date]** to avoid any delays in processing or payments.

Thank you for your prompt attention to this matter.

Sincerely,

[Your Name]
[Your Title]
[Your Company Name]
[Phone Number]