

[Date]

[Insured Name]  
[Address Line 1]  
[Address Line 2]  
[City, State, Zip Code]

**Re: Premium Invoice and Pollution Liability Extension Endorsement Notice**

Policy Number: [Policy Number]  
Policy Period: [Start Date] to [End Date]

Dear [Insured Name],

Enclosed please find the premium invoice for your upcoming policy term, along with the formally executed **Pollution Liability Extension Endorsement**.

The attached endorsement extends your current coverage to include specific pollution-related liabilities as outlined in the policy terms. We recommend that you review this document carefully to understand the scope of coverage, including any applicable limits and exclusions.

**Payment Summary:**

- Base Policy Premium: \$[Amount]
- Pollution Liability Extension Premium: \$[Amount]
- Taxes and Fees: \$[Amount]
- **Total Amount Due: \$[Total Amount]**

Please ensure that payment is received by [Due Date] to maintain continuous coverage. Payments can be made via [Payment Method/Portal Link].

If you have any questions regarding this endorsement or your invoice, please contact your agent or our billing department at [Phone Number] or [Email Address].

Thank you for choosing [Insurance Company Name].

Sincerely,

[Sender Name]  
[Title]  
[Insurance Company Name]