[Insurer Name]
[Insurer Address]
[City, State, Zip Code]

[Date]

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

Subject: Issuance of Seasonal Home Vacancy Permit Endorsement

Dear [Policyholder Name],

This letter serves as official notification that the requested **Seasonal Home Vacancy Permit Endorsement** has been issued and added to your homeowner's insurance policy, effective [Effective Date].

Policy Details:

- **Policy Number:** [Policy Number]
- **Insured Property:** [Property Address]
- **Endorsement Period:** [Start Date] to [End Date]

This endorsement extends coverage to your property during the specified period of seasonal vacancy. Please note that all terms and conditions of your primary policy remain in effect. To ensure continued coverage, you must adhere to the following protective safeguards as outlined in the endorsement:

- [Requirement 1, e.g., Water supply must be shut off and pipes drained]
- [Requirement 2, e.g., Central station alarm system must remain active]
- [Requirement 3, e.g., Property must be inspected weekly by a designated person]

Failure to comply with these safeguards may result in a denial of coverage in the event of a claim. Please review the attached endorsement document carefully and file it with your original policy papers.

If you have any questions or if your vacancy plans change, please contact your agent at [Agent Phone Number] or [Agent Email Address].

Sincerely,

[Name/Signature]
[Title]
[Insurance Company/Agency Name]