[Date]

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

RE: Pending General Liability Policy Lapse
Insured: [Business Name]
Policy Number: [Policy Number]
Expiration/Cancellation Date: [Date]

Dear [Agent Name or Agency Team],

I am writing to follow up on the pending lapse notice received regarding my General Liability insurance policy. I would like to confirm the current status of this policy and ensure that coverage remains active.

Please provide an update on the following:

- The exact reason for the pending lapse (e.g., pending payment, missing documents, or renewal status).
- The minimum balance or specific actions required to prevent a break in coverage.
- The deadline by which these actions must be completed.

If payment has already been processed or if the necessary documents have been submitted, please provide a written confirmation that the policy is in good standing.

Thank you for your prompt attention to this matter. I look forward to your reply.

Sincerely,

[Your Name]
[Your Phone Number]
[Your Email Address]