**DATE:** [Insert Date]

**TO:** [Vendor/Contractor Name]
**ATTN:** [Contact Person]
**ADDRESS:** [Street Address, City, State, Zip]

**RE: NOTICE OF NON-COMPLIANCE - GENERAL LIABILITY INSURANCE LAPSE**

Dear [Name],

This letter serves as a formal notice regarding your non-compliance with the insurance requirements set forth in our agreement dated [Contract Date] (the "Contract").

Upon reviewing our records, we have identified that your General Liability insurance coverage has lapsed or expired as of [Expiration Date].

Per Section [Insert Section Number] of the Contract, you are required to maintain continuous General Liability coverage in the amount of [Insert Amount] and provide a valid Certificate of Insurance (COI) naming [Your Company Name] as an Additional Insured.

**Action Required:**

To remedy this breach of contract, you must provide a current Certificate of Insurance reflecting the required coverage no later than [Insert Deadline Date].

Failure to provide proof of insurance by the date mentioned above may result in the following actions:

- Suspension of work or services.
- Withholding of pending payments.
- Termination of the Contract for cause.

Please send the updated documentation to [Email Address] or upload it via [Insert Portal Link].

If you have already renewed your policy, please disregard this letter and provide the updated certificate immediately.

Sincerely,

[Your Name]
[Your Title]
[Your Company Name]