

[Date]

[Policyholder Name]

[Mailing Address]

[City, State, Zip Code]

**Subject: NOTICE OF IMPENDING LAPSE OF RENTER'S INSURANCE**

Dear [Policyholder Name],

This letter is to notify you that your renter's insurance policy, [Policy Number], is scheduled to lapse on [Expiration Date] due to [Reason, e.g., non-payment / expiration of term].

To ensure that your personal property and liability coverage remain active, we must receive your payment or renewal confirmation no later than [Due Date].

**Consequences of Lapse:**

- Loss of coverage for personal belongings against fire, theft, or damage.
- Loss of personal liability protection.
- Potential violation of your lease agreement with [Landlord/Property Management Name].

If you have already sent your payment, please disregard this notice. If you would like to make a payment over the phone or discuss your policy options, please contact us at [Phone Number] or visit our website at [Website URL].

Thank you for your prompt attention to this matter.

Sincerely,

[Agent Name/Company Name]

[Contact Information]