

[Insurance Company Name]  
[Mailing Address]  
[City, State, Zip Code]  
[Phone Number]

**Date:** [Date]

**RE: NOTICE OF NON-RENEWAL OF HOMEOWNERS INSURANCE**

**Policyholder Name:** [Policyholder Name]  
**Policy Number:** [Policy Number]  
**Property Address:** [Insured Property Address]  
**Expiration Date:** [Date Policy Ends]

Dear [Policyholder Name],

We are writing to inform you that [Insurance Company Name] will not be renewing your homeowners insurance policy. Coverage under your current policy will terminate at 12:01 AM on [Date Policy Ends].

This decision was made following a comprehensive review of your policy history. Specifically, the non-renewal is due to the frequency and severity of claims filed during the current and previous policy terms, including:

- [Date of Loss 1]: [Brief Description of Loss/Amount Paid]
- [Date of Loss 2]: [Brief Description of Loss/Amount Paid]
- [Date of Loss 3]: [Brief Description of Loss/Amount Paid]

As a result of these multiple severe losses, your property no longer meets the underwriting guidelines of our company. Your coverage will remain in effect until the expiration date listed above, provided all premiums are paid.

We recommend that you seek alternative coverage immediately to avoid any lapse in protection. You may wish to contact an independent insurance agent or explore your state's FAIR Plan (Fair Access to Insurance Requirements) if you encounter difficulty obtaining coverage in the private market.

If you believe the information used to make this decision is incorrect, or if you wish to appeal this non-renewal, please contact our Underwriting Department at [Phone Number] or submit a written request to the address provided above.

Thank you for your past business.

Sincerely,

[Name of Underwriter/Representative]

[Title]

[Insurance Company Name]