

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

DATE: [Date]

RE: NOTICE OF NON-RENEWAL OF INSURANCE

Policy Number: [Policy Number]
Policy Expiration Date: [Expiration Date]
Property Address: [Insured Property Address]

Dear [Policyholder Name],

Thank you for choosing [Company Name] for your homeowners insurance needs. This letter is to formally notify you that we will not be renewing your insurance policy when it expires on [Expiration Date].

Reason for Non-Renewal:

This decision was made based on our current underwriting guidelines regarding the following specific reason(s):

- [Insert specific underwriting reason, e.g., Condition of roof, proximity to brush, loss history, or change in company risk appetite]

Your current coverage will remain in effect until 12:01 A.M. on [Expiration Date]. To avoid any lapse in coverage, we recommend that you begin contacting other insurance carriers or a licensed agent immediately to secure a new policy.

If you believe the information we used to make this decision is incorrect, or if you have made recent improvements to the property that may affect our evaluation, please contact our underwriting department at [Phone Number] or [Email Address].

We appreciate the opportunity to have served you.

Sincerely,

[Name of Underwriter/Representative]
[Title]
[Company Name]