

NOTICE OF NON-RENEWAL OF INSURANCE

Date: [Insert Date]

Policyholder Name: [Insert Name]

Mailing Address: [Insert Address]

City, State, Zip: [Insert City, State, Zip]

Policy Number: [Insert Policy Number]

Property Address: [Insert Property Address]

Expiration Date: [Insert Expiration Date]

Dear [Insert Policyholder Name],

This letter serves as formal notice that [Insert Insurance Company Name] will not be renewing your insurance policy for the property listed above. Your coverage will terminate effective at 12:01 A.M. on [Insert Expiration Date].

Reason for Non-Renewal:

The property is currently classified as high-risk due to its vacant status. After a recent review, it has been determined that the property no longer meets our underwriting guidelines for continued coverage. Specific factors include [Insert Specific Reasons, e.g., length of vacancy, lack of security, or property condition].

Important Information:

To avoid a lapse in coverage, we recommend that you contact an insurance agent or broker immediately to secure alternative insurance through a specialty carrier or a state FAIR plan. A lapse in insurance may result in a lack of protection against loss and may violate the terms of any existing mortgage agreement on the property.

If you believe this decision was made in error or if the occupancy status of the property has changed, please contact our underwriting department at [Insert Phone Number] or [Insert Email Address] before [Insert Deadline Date].

Sincerely,

[Insert Name/Department]

[Insert Insurance Company Name]