

[Date]

[Insured Name]

[Insured Address]

[City, State, Zip Code]

RE: NOTICE OF NON-RENEWAL OF INSURANCE

Policy Number: [Policy Number]

Expiration Date: [Expiration Date]

Dear [Insured Name],

Please be advised that [Insurance Company Name] will not be renewing the above-referenced General Liability insurance policy. Your coverage will terminate effective at 12:01 A.M. on [Expiration Date].

This decision has been made due to the failure to mitigate identified risks. Specifically, our records indicate that the following safety recommendations or risk improvement requirements, communicated to you on [Date of Original Risk Assessment/Notice], have not been addressed to our satisfaction:

- [Description of unaddressed risk/hazard #1]
- [Description of unaddressed risk/hazard #2]

As these hazards remain uncorrected, the risk no longer meets our underwriting guidelines for continued coverage.

To avoid a lapse in coverage, we recommend that you contact your insurance agent or broker immediately to secure alternative insurance with another carrier prior to the expiration date listed above.

Sincerely,

[Underwriter Name/Signature]

[Insurance Company Name]

[Contact Information]