

[Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

RE: Notice of Non-Renewal of Insurance Policy #[Policy Number]

Dear [Policyholder Name],

This letter is to formally notify you that [Insurance Company Name] will not be renewing your automobile insurance policy, which is scheduled to expire on [Policy Expiration Date] at 12:01 A.M.

This decision was made following a review of your driving record, which indicates a severe driving infraction. Specifically, our underwriting guidelines do not permit the renewal of policies for drivers with the following violation(s):

- Violation Type: [Type of Infraction, e.g., DUI, Reckless Driving]
- Date of Occurrence: [Date]
- Jurisdiction: [Location/State]

As a result of this infraction, you no longer meet the eligibility requirements for coverage with our company. Your current coverage will remain in effect until the expiration date listed above. We recommend that you begin seeking alternative coverage immediately to avoid any lapse in insurance, which may lead to legal penalties or higher premiums in the future.

If you believe this decision is based on incorrect information, you have the right to provide documentation to correct your motor vehicle record. Please contact [Department/Agent Name] at [Phone Number] if you have questions regarding this notice.

Sincerely,

[Underwriter Name/Signature]

[Insurance Company Name]

[Company Address]