

Date: [Insert Date]

Policyholder Name: [Insert Primary Policyholder Name]

Policy Number: [Insert Policy Number]

Subject: Notice of Non-Renewal of Personal Auto Insurance

Dear [Insert Policyholder Name],

Please be advised that [Insert Insurance Company Name] will not be renewing your personal automobile insurance policy, which is scheduled to expire on [Insert Expiration Date] at 12:01 AM.

Reason for Non-Renewal:

This decision has been made due to the driver's license suspension of [Insert Name of Added Driver], who is currently listed as a driver on your policy. Our underwriting guidelines require all listed drivers to maintain a valid and active driver's license to qualify for continued coverage.

Important Information:

- Your current coverage remains in effect until the expiration date and time listed above.
- We recommend that you obtain replacement insurance coverage immediately to avoid any lapse in protection or legal penalties for operating an uninsured vehicle.
- If the status of the driver's license changes or if you wish to request the removal of this driver from the policy for reconsideration, please contact your agent immediately.

If you have any questions regarding this notice or your policy, please contact our customer service department at [Insert Phone Number] or your insurance agent, [Insert Agent Name], at [Insert Agent Phone Number].

Sincerely,

[Insert Name/Signature]

[Insert Title]

[Insert Insurance Company Name]