[Date]

[Client Name]
[Address]
[City, State, Zip Code]

Subject: Important Notice Regarding Your Annual Insurance Renewal

Dear [Client Name],

Your insurance policy, [Policy Number], is scheduled for renewal on [Renewal Date]. We value your continued trust in [Company Name] and are committed to providing you with the best coverage options available.

To review your updated policy documents and confirm your renewal, please log in to our secure client portal. The portal allows you to view coverage details, print ID cards, and update your payment information.

How to Navigate the Portal:

1. Visit our website at: [Website URL]
2. Click on the **"Client Login"** button at the top right of the page.
3. Enter your username and password. (Click "Forgot Password" if you need a reset).
4. Once logged in, click the **"Renewals"** tab on the main dashboard.
5. Select **"Review and E-Sign"** to complete your renewal process.

Please complete this review by [Deadline Date] to ensure there is no lapse in your coverage.

If you have any questions or would like to discuss changes to your coverage, please contact your agent at [Phone Number] or [Email Address].

Thank you for choosing [Company Name].

Sincerely,

[Agent Name]
[Company Name]