[Your Name/Company Name]
[Address Line 1]
[Address Line 2]
[City, State, Zip Code]
[Phone Number]
[Email Address]

[Date]

[Recipient Name]
[Recipient Address Line 1]
[Recipient Address Line 2]
[City, State, Zip Code]

Subject: Follow-Up: Setting Up Your Automatic Premium Payments

Dear [Recipient Name],

I am writing to follow up on our previous communication regarding the setup of your automatic premium payments for your policy, number [Policy Number].

As of today, we have not yet received the completed authorization form required to activate this service. Switching to automatic payments ensures that your coverage remains active without the risk of missed deadlines or late fees.

To finalize your enrollment, please complete one of the following steps:

- **Online:** Log in to your account at [Website URL] and navigate to the "Payments" section.
- **By Mail:** Complete and return the enclosed authorization form in the provided envelope.
- **By Phone:** Call our customer service team at [Phone Number] to set it up over the phone.

If you have already submitted your request, please disregard this letter as it may still be in processing. If you have any questions or need assistance with the forms, please do not hesitate to reach out.

Thank you for your continued trust in our services.

Sincerely,

[Your Name/Signature]
[Your Title]