

[Date]

[Carrier Name]

[Carrier Address]

[City, State, Zip Code]

**Subject: NOTICE: Annual Carrier Appointment Renewal Reminder**

Dear [Contact Name],

This letter serves as a formal reminder that your annual appointment with [Agency/Company Name] is scheduled to expire on **[Expiration Date]**.

To ensure there is no disruption in your ability to represent our products and submit new business, please complete the renewal process by **[Deadline Date]**. The following items are required for renewal:

- Completed Renewal Application Form
- Updated Copy of State Producer/Agency License
- Current Proof of Errors and Omissions (E&O) Insurance
- Annual Appointment Fee of \$[Amount], if applicable

Please submit the required documentation via [Submission Method - e.g., Online Portal/Email/Mail].

Failure to renew by the expiration date may result in the automatic termination of your appointment and the suspension of commission payments.

If you have already submitted your renewal paperwork, please disregard this notice. If you have any questions regarding your status, please contact our Licensing Department at [Phone Number] or [Email Address].

Thank you for your continued partnership.

Sincerely,

[Your Name]

[Your Title]

[Agency/Company Name]