[Date]

[Policyholder Name]
[Address Line 1]
[City, State, Zip Code]

Subject: NOTICE OF DELINQUENT ACCOUNT - Policy #[Policy Number]

Dear [Policyholder Name],

This is a formal reminder that your auto insurance premium payment for the policy listed above is currently past due. Our records indicate that we have not received your payment scheduled for [Due Date].

Account Summary:

- Past Due Amount: $[Amount]
- Late Fee: $[Amount]
- **Total Amount Due: $[Total Amount]**

To ensure your coverage remains active and to avoid the risk of policy cancellation, please submit your payment immediately. You can make a payment via the following methods:

- Online: [Website URL]
- Phone: [Phone Number]
- Mail: [Mailing Address for Payments]

Please note that a lapse in insurance coverage can lead to legal penalties and higher future premiums. If you have already sent your payment, please disregard this notice.

If you are experiencing financial difficulties or have questions regarding your account, please contact our billing department at [Phone Number] as soon as possible.

Sincerely,

[Sender Name/Department]
[Insurance Company Name]