

[Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

Subject: URGENT - Notice of Impending Lapse and Payment Reminder

Policy Type: Personal Umbrella Liability

Policy Number: [Policy Number]

Expiration Date: [Expiration Date]

Dear [Policyholder Name],

Our records indicate that we have not yet received the renewal premium payment for your Umbrella Liability insurance policy. Your current coverage is scheduled to expire on **[Expiration Date]** at 12:01 AM.

To ensure your assets remain protected and to avoid a lapse in coverage, please submit your payment of **[\$Amount Due]** by **[Due Date]**.

A lapse in your Umbrella Policy could leave you personally responsible for claims that exceed the limits of your primary auto or homeowners insurance policies.

How to Pay:

- **Online:** Visit [Website URL]
- **Phone:** Call [Phone Number]
- **Mail:** Send a check to [Payment Address]

If you have already sent your payment, please disregard this notice. If you have questions regarding your renewal or wish to make changes to your coverage, please contact your agent at [Agent Phone Number].

Sincerely,

[Company Name]

[Billing Department]