

[Date]

[Policyholder Name]

[Address]

[City, State, Zip Code]

**Subject: RENEWAL NOTICE - Umbrella Insurance Policy #[Policy Number]**

Dear [Policyholder Name],

This is a reminder that your Umbrella Insurance Policy is scheduled to renew on [Expiration Date]. To ensure that your extra liability protection remains active without interruption, your annual premium payment is now due.

**Renewal Details:**

- **Policy Number:** [Policy Number]
- **Renewal Date:** [Date]
- **Annual Premium Amount:** \$[Amount]
- **Payment Due Date:** [Date]

**How to Pay:**

- **Online:** Visit [Website URL] and log in to your account.
- **Phone:** Call our billing department at [Phone Number].
- **Mail:** Send a check payable to [Company Name] using the enclosed envelope.

If payment is not received by [Date], your policy may be subject to cancellation, leaving you without important secondary liability coverage. If you have already sent your payment, please disregard this notice.

If you have any questions regarding your coverage or would like to review your policy limits, please contact your agent at [Agent Phone Number].

Thank you for choosing [Company Name].

Sincerely,

[Sender Name]

[Company Name]