

## **FINAL DEMAND NOTICE**

Date: [Insert Date]

Policyholder Name: [Insert Name]

Policy Number: [Insert Policy Number]

Property Address: [Insert Property Address]

Amount Due: [Insert Amount]

Dear [Insert Policyholder Name],

This is a formal and final demand for the renewal payment of your flood insurance policy. Our records indicate that your premium remains unpaid despite previous notifications.

Your coverage is currently scheduled to expire or has expired as of [Insert Expiration Date]. Failure to remit payment immediately will result in the permanent cancellation of your flood insurance policy.

### **Consequences of Non-Payment:**

- Total loss of protection against flood damage.
- Violation of mortgage requirements (if applicable), which may lead to force-placed insurance at a significantly higher cost.
- Loss of eligibility for subsidized rates or "grandfathered" status.

To maintain your coverage, please pay the amount of [Insert Amount] by [Insert Deadline Date] via one of the following methods:

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

If payment has already been sent, please disregard this notice. If you have questions or believe this notice was sent in error, contact us immediately at [Insert Customer Service Phone Number].

Sincerely,

[Your Name/Department]

[Insurance Company Name]