

[Date]

[Insured Name]

[Mailing Address]

[City, State, Zip Code]

RE: Homeowners Insurance Policy Number: [Policy Number]

Dear [Insured Name],

Thank you for choosing [Agency/Company Name] for your homeowners insurance needs. We are pleased to provide you with your new insurance policy documents, which are enclosed for your records.

Please review your policy carefully to ensure that the coverage limits, deductibles, and property information are correct. If you have any questions or require changes, please contact our office immediately.

Action Required: Outstanding Signatures

While your coverage is currently active, we have not yet received all required signatures. To remain in compliance with underwriting guidelines, please sign and return the following documents:

- [Document Name 1, e.g., Application Summary]
- [Document Name 2, e.g., Exclusion Election Form]
- [Document Name 3, e.g., Replacement Cost Acknowledgment]

Please return the signed documents by [Due Date] via one of the following methods:

- **Email:** [Email Address]
- **Fax:** [Fax Number]
- **Mail:** Using the enclosed prepaid envelope

Failure to return these documents may result in a notice of cancellation from the carrier. We appreciate your prompt attention to this matter.

Sincerely,

[Agent Name]

[Agency Name]

[Phone Number]