[Date]

[Policyholder Name]
[Mailing Address]
[City, State, Zip Code]

Subject: Confirmation of Reinstated Renter's Insurance Policy

Dear [Policyholder Name],

We are pleased to inform you that your renter's insurance policy, [Policy Number], has been officially reinstated effective [Effective Date]. Your coverage is now active and continues without a lapse.

Please find your updated policy documents and proof of insurance attached to this letter. We recommend reviewing these documents to ensure all information regarding your covered property and limits is accurate.

Policy Details:

- Policy Number: [Policy Number]
- Coverage Period: [Start Date] to [End Date]
- Property Address: [Insured Address]

If you have any questions regarding your premium, payment schedule, or coverage details, please contact our customer service team at [Phone Number] or visit our website at [Website URL].

Thank you for continuing to choose [Company Name] for your insurance needs.

Sincerely,

[Agent/Representative Name]
[Company Name]
[Phone Number]