[Your Name/Company Name]
[Your Address]
[City, State, Zip Code]
[Phone Number]
[Email Address]

[Date]

[Insurance Company Name]
[Claims/Underwriting Department]
[Address]
[City, State, Zip Code]

RE: Request for Reinstatement of Liability Protection
Policy Number: [Policy Number]
Property Address: [Full Address of Vacation Property]

To Whom It May Concern,

I am writing to formally request the reinstatement of the liability protection coverage for the vacation property mentioned above, which was recently [suspended/canceled] effective [Date of Cancellation].

The reason for the lapse in coverage was due to [State Reason, e.g., an administrative oversight, a missed premium payment, or a pending safety inspection]. Since that time, the following actions have been taken to resolve the issue:

- [Action 1: e.g., Full payment of outstanding premium in the amount of $XXX]
- [Action 2: e.g., Completion of required safety repairs/inspections]
- [Action 3: e.g., Updated contact information provided]

I have attached [List attachments, e.g., proof of payment, inspection reports, or photos] for your review. This property is used as a [Short-term rental/Private vacation home], and it is essential that the liability coverage is active to ensure the safety of guests and the protection of the property.

Please confirm that the coverage has been reinstated and provide a copy of the updated policy declarations page. If any further information or documentation is required to complete this process, please contact me immediately at [Phone Number].

Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature]

[Your Printed Name]