

[Your Name/Agency Name]
[Address]
[City, State, Zip Code]
[Phone Number]
[Date]

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

Subject: Notice of Reinstatement - Umbrella Insurance Policy #[Policy Number]

Dear [Policyholder Name],

We are pleased to inform you that your Umbrella Liability Insurance policy has been officially reinstated. We received your payment of \$[Amount] on [Date], which covers the outstanding balance required to keep your coverage active.

Because this payment was received within the allowable grace period, your coverage remains continuous. There has been no lapse in protection, and your original policy terms, conditions, and expiration dates remain in effect.

Please keep this letter with your insurance records as confirmation that your liability protection is secure. To prevent future concerns regarding grace periods, we recommend enrolling in our automatic payment program.

If you have any questions regarding your premium or coverage limits, please contact us at [Phone Number] or [Email Address].

Sincerely,

[Signature]
[Name of Sender]
[Title]
[Company Name]