

[Date]

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

RE: Request for Reinstatement of Directors and Officers (D&O) Liability Insurance

Policy Number: [Insert Policy Number]
Insured Name: [Insert Agency Name]

Dear Underwriting Department,

We are formally requesting the reinstatement of the above-referenced Directors and Officers Liability Insurance policy, which was [cancelled/lapsed] on [Date of Cancellation] due to [State Reason, e.g., non-payment of premium/administrative oversight].

Enclosed with this letter, please find:

- The full premium payment in the amount of \$[Amount].
- A signed and dated "No Known Loss" Letter (Statement of No Material Change).
- [Any other requested documentation, e.g., updated financial statements].

We confirm that as of the date of this letter, there are no pending claims, nor are there any facts or circumstances known to any director or officer that could reasonably give rise to a claim under this policy.

Please confirm receipt of this request and provide written verification once the coverage has been formally reinstated. Should you require any additional information, please contact [Contact Name] at [Phone Number] or [Email Address].

Thank you for your prompt attention to this matter.

Sincerely,

[Signature]

[Print Name]
[Title, e.g., Managing Director/President]
[Agency Name]