

[Date]

[Policyholder Name]

[Mailing Address]

[City, State, Zip Code]

RE: FINAL NOTICE - Policy Number: [Policy Number]

Dear [Policyholder Name],

Our records indicate that we have not yet received your payment or renewal authorization for your homeowners insurance policy, which is scheduled to expire on **[Expiration Date]**.

This is your **Final Notice**. If action is not taken by [Time] on [Date], your coverage will lapse. A lapse in coverage may result in:

- Loss of protection for your home and personal property.
- Violation of your mortgage agreement requirements.
- Higher premiums when seeking future coverage.

To maintain your coverage, please choose one of the following options immediately:

1. **Pay Online:** Visit [Website URL] and log in to your account.
2. **Pay by Phone:** Call our billing department at [Phone Number].
3. **Pay by Mail:** Ensure your check reaches us before the expiration date.

If you have already sent your payment or have switched providers, please contact us at [Phone Number] so we can update your file.

Thank you for your prompt attention to this matter.

Sincerely,

[Agent/Representative Name]

[Insurance Company Name]

[Contact Phone Number]