

[Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

**RE: Early Notification of Renewal - Employment Practices Liability Insurance (EPLI)**

Dear [Contact Name],

Your Employment Practices Liability Insurance policy number [Policy Number] is scheduled to expire on [Expiration Date].

To ensure continuous coverage and to provide sufficient time for the underwriting process, we are initiating the renewal review early. This allows us to account for any changes in your workforce, company revenue, or updated labor laws that may impact your premiums or coverage terms.

To begin the renewal process, please provide the following information by [Due Date]:

- A completed and signed Renewal Application.
- Current employee headcount (Full-time, Part-time, and Independent Contractors).
- Updated Employee Handbook (if revised in the last 12 months).
- Details regarding any layoffs or significant staffing changes planned for the upcoming year.

Timely submission of these documents will help us secure the most competitive terms and avoid any lapse in coverage. If you have experienced any incidents or circumstances that could lead to a claim, please notify us immediately as part of your reporting obligations.

Please send the requested documents to [Email Address/Contact Person].

Thank you for your prompt attention to this matter.

Sincerely,

[Sender Name]

[Title]

[Company Name]