

Date: [Insert Date]

To: [Insert Contact Name / Human Resources Department]

From: [Insert Broker/Agency Name]

Subject: FIRST NOTICE: Renewal of Employment Practices Liability Insurance

Dear [Insert Name],

This letter serves as formal notification that your Employment Practices Liability Insurance (EPLI) policy, number [Insert Policy Number], is scheduled to expire on [Insert Expiration Date].

To ensure continuous coverage and to allow sufficient time for market review and negotiations with underwriters, we must begin the renewal process now. Please find the renewal application attached to this correspondence.

To provide you with the most competitive terms, we kindly request that you submit the following by [Insert Deadline Date]:

- Completed and signed renewal application.
- Current employee headcount (Full-time, Part-time, and Seasonal).
- Updated copy of your Employee Handbook (if revised in the last 12 months).
- Summary of any employment-related claims or incidents occurring within the current policy term.

Timely submission of these documents is critical to avoid any lapse in coverage or potential premium increases due to late filing.

Please return the completed documents to [Insert Email Address] or contact us at [Insert Phone Number] if you have any questions regarding your current coverage or the renewal process.

Sincerely,

[Insert Your Name]

[Insert Your Title]

[Insert Company Name]