

Date: [Insert Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

Subject: IMPORTANT NOTICE - Upcoming Expiration of Employment Practices Liability (EPL) Insurance

Dear [Contact Name],

We are writing to notify you that your Employment Practices Liability (EPL) insurance policy, number [Policy Number], is scheduled to expire on **[Expiration Date]**.

This coverage protects your business against claims brought by employees or applicants regarding issues such as wrongful termination, discrimination, sexual harassment, and other employment-related allegations. Allowing this coverage to lapse could leave your company exposed to significant legal costs and settlement expenses.

To ensure continuous protection, we need to begin the renewal process immediately. Please take the following steps:

- Review your current coverage limits and deductibles.
- Complete and return the attached renewal application.
- Provide an updated employee count and current employee handbook (if requested).

If there have been any changes to your business operations or if you have any pending employment legal matters, please notify us as soon as possible.

Please contact us at [Phone Number] or [Email Address] by [Deadline Date] to discuss your renewal options and ensure there is no gap in your coverage.

Sincerely,

[Your Name/Agent Name]

[Company Name]