

[Date]

[Policyholder Name]
[Policyholder Mailing Address]
[City, State, Zip Code]

RE: Notice of Insurance Renewal - Vacant Commercial Property

Policy Number: [Policy Number]
Property Address: [Insured Property Address]
Expiration Date: [Policy Expiration Date]

Dear [Policyholder Name],

Your commercial property insurance policy for the vacant premises listed above is scheduled to expire on [Expiration Date]. We are pleased to provide you with a renewal offer to ensure continued protection for your asset.

Because the property remains vacant, please review the following important details regarding your renewal:

- **Premium Amount:** \$[Amount]
- **Coverage Period:** [Start Date] to [End Date]
- **Protective Safeguards:** This policy requires that the property be secured, all doors/windows locked, and [Insert specific requirements like "heat maintained" or "monitored alarm"].
- **Inspection Requirement:** An updated exterior and interior inspection may be required by the carrier upon renewal.

To prevent a lapse in coverage, please sign the attached renewal application and submit your payment by [Due Date].

If the occupancy status of the building has changed or if you have secured a new tenant, please contact our office immediately, as this may result in a significant premium reduction and a change in policy form.

Thank you for choosing [Agency Name]. Please contact me at [Phone Number] or [Email Address] if you have any questions.

Sincerely,

[Agent Name]
[Agency Name]