

[Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

RE: Extension of Renewal Grace Period

Policy Number: [Policy Number]

Insured Item: [Description of Jewelry]

Dear [Policyholder Name],

This letter is to formally notify you that we have granted a one-time extension to the renewal grace period for your jewelry insurance policy referenced above.

The original expiration date for your coverage was [Original Expiration Date]. We have now extended your coverage until [New Extension Deadline Date].

Please be advised of the following:

- **Coverage Status:** Your jewelry remains fully insured under the existing terms and conditions until the new deadline.
- **Payment Due:** To prevent a lapse in coverage and ensure your policy remains active, we must receive your renewal premium of \$[Amount] no later than [New Extension Deadline Date].
- **Consequences of Non-Payment:** If payment is not received by the extended date, your policy will automatically expire effective [New Extension Deadline Date] at 12:01 AM, and no further grace periods will be provided.

You may submit your payment via [Payment Method: Online Portal/Phone/Check].

If you have already sent your payment, please disregard this notice. If you have any questions regarding your premium or the terms of this extension, please contact us at [Phone Number] or [Email Address].

Sincerely,

[Your Name/Representative Name]

[Company Name]

[Department Name]