

# Notification of Grace Period Assistance

Date: [Insert Date]

Dear [Policyholder's Name],

We hope this message finds you well. We are writing to inform you about your policy under number [Policy Number] that is currently due for renewal on [Renewal Date].

This notice serves to notify you that a grace period of [X days] is available, allowing you to maintain your coverage while facilitating the renewal process. The grace period extends until [End Date of Grace Period].

If you have any questions or require assistance during this time, do not hesitate to reach out to us at [Contact Information]. We appreciate your continued trust in our services.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Position]

[Company Name]

[Company Contact Information]