

Notification of Insurance Policy Cessation

Dear [Policyholder's Name],

We are writing to inform you that your insurance policy (Policy Number: [Policy Number]) will be ceased as of [Cessation Date]. This decision has been made due to [Reason for Cessation].

Please ensure that all outstanding premiums are settled by the cessation date to avoid any complications. If you have any questions or require further information, do not hesitate to contact us at [Contact Information].

Thank you for your understanding.

Sincerely,
[Your Name]
[Your Position]
[Company Name]
[Company Contact Information]