

# Notice of Cancellation of Earthquake Insurance

Date: [Insert Date]

[Insured's Name]

[Insured's Address]

[City, State, Zip Code]

Dear [Insured's Name],

We are writing to inform you that your earthquake insurance policy [Policy Number] will be canceled effective [Cancellation Date]. This decision has been made due to [reason for cancellation, e.g., non-payment, change in risk assessment, etc.].

Please take the necessary steps to secure alternate coverage. If you have any questions or require assistance, feel free to contact our office at [Contact Information].

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Position]

[Insurance Company Name]

[Contact Information]