

Immediate Premium Payment Notice

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Address]

Dear [Recipient's Name],

This letter is to inform you that your insurance premium for the policy number [Policy Number] is now due. To ensure that your coverage remains uninterrupted, we kindly request that you make the immediate payment of [Amount Due] by [Due Date].

Payment can be made through the following methods:

- Online payment via our website
- Check payable to [Company Name]
- Phone payment at [Phone Number]

Should you have any questions or require further assistance, please do not hesitate to contact us at [Customer Service Phone Number] or [Customer Service Email].

Thank you for your prompt attention to this matter.

Sincerely,

[Your Name]

[Your Position]

[Company Name]

[Company Address]

[Company Phone Number]