

Insurance Policy Lapse Reminder Notice

Dear [Policyholder's Name],

This is a friendly reminder that your insurance policy with us, Policy Number: [Policy Number], is at risk of lapsing on [Lapse Date].

To ensure continued coverage and avoid any gaps in your insurance, please take the necessary steps to renew your policy or make the required payment by the due date.

If you have already made your payment, please disregard this notice. Otherwise, feel free to contact us at [Customer Service Phone Number] or [Customer Service Email] should you have any questions or require assistance.

Thank you for choosing [Insurance Company Name]. We value your business.

Sincerely,

[Your Name]

[Your Title]

[Insurance Company Name]

[Contact Information]