

Notice of Grace Period for Overdue Payment

Dear [Policyholder's Name],

We hope this message finds you well. This is a friendly reminder regarding your insurance policy with us, policy number [Policy Number]. We noticed that your recent payment was not received by the due date of [Due Date].

We want to inform you that a grace period of [Number of Days] days has been granted, during which you can still make your payment without any penalties. The grace period will end on [End Date]. After this date, a late fee may apply, and your coverage may be impacted.

Please ensure that your payment is made by the end of the grace period to maintain your policy in good standing. If you have already submitted your payment, please disregard this notice. If you're facing any difficulties or have questions, feel free to contact our customer service team at [Customer Service Phone Number] or [Customer Service Email].

Thank you for your attention to this matter. We appreciate your business.

Sincerely,

[Your Name]

[Your Position]

[Insurance Company Name]

[Contact Information]