

11013 West Broad Street, Suite 300, Glen Allen, VA 23060

{today}

**VIA FIRST CLASS MAIL and CERTIFIED MAIL/RETURN RECEIPT REQUESTED**

**VIA EMAIL:** {insuredEmail}

{insuredName}

{insuredAddr}

**SECOND AND FINAL REQUEST**

|  |  |
| --- | --- |
| **Name Insured:** | {insuredName} |
| **Claimant:** | {claimants} |
| **Policy Number:** | {policyNumber} |
| **Claim Number:** | {claimNumber} |
| **Date of Loss:** | {dateLoss} |

Dear Insured:

Please recall that Richmond National Services, Inc. (hereinafter “RNSI”) is the claims’ administrator for Richmond National Insurance Company (hereinafter “RNIC”). We previously sent you a request to pay your liability deductible in the above referenced matter, but have not received payment.

***If we do not receive payment within 30 days of this letter, we will be sending this matter to collections.***

If you need to speak to someone about payment arrangements or have any questions regarding this deductible that is due, please call 804/256-3345 and reference the claim number noted above.

Please remit payment in full of your deductible in the amount of ${deductible}.

Please make all checks payable to:

Richmond National Insurance Company

Attn: Noah Laurence - Controller

11013 West Broad Street

Suite 300

Glen Allen, VA 23060

Alternatively, you may pay by ACH:

A close-up of a card

Description automatically generated

Thank you for your anticipated cooperation in this matter.

Should you have any questions or concerns, you may call us at 804/256-0525 or email us at [claims@richmondnational.com](mailto:claims@richmondnational.com). ***Please include your claim number on any correspondence.***

Warm regards,

Richmond National