Address Block

RE: Claim Number:
Insured: (Your Name)
Date of Loss:

Re: Request for information about claim denial

Dear (insert name of Insurance Adjuster/Insurance Company Representative),

The purpose of this letter is to request that you keep us informed on our claim by giving us the following information at your earliest convenience, and no later than one week from today. (Optional: As you know, we have suffered a major loss that is having a big impact on our lives and we are struggling to recover). Please (email, call or mail) us with:

1) The exact wording of the policy language you are relying on to reject our claim.

2) Complete copies of all evaluations, reports, estimates you have prepared or caused to be prepared that relate to our property and the claim referenced in this letter.

Thank you in advance for your prompt and complete reply. As you can imagine, this matter is extremely important to us.

I look forward to (insert name of insurance company)’s response by (insert a date that’s a week from the date of the letter). Thank you for your anticipated cooperation in this matter.

Sincerely,