

[Your Name]  
[Your Address]  
[City, State, ZIP Code]  
[Email Address]  
[Phone Number]  
[Date]  
[Insurance Company Name]  
[Claims Department Address]  
[City, State, ZIP Code]

Dear [Claims Adjuster's Name or "Claims Department"],

Subject: Insurance Claim for [Policy Number/Claim Number]

I am writing to formally submit my claim related to [brief description of the incident, e.g., car accident, property damage, etc.] that occurred on [date of incident]. My policy number is [insert policy number].

[Provide a detailed explanation of the incident, including any relevant dates, locations, and circumstances.]

Attached to this letter, you will find all necessary documentation to support my claim, including:

- [List of attached documents, e.g., photographs, police reports, repair estimates, etc.]

I kindly request your prompt attention to this matter and would appreciate a response at your earliest convenience. If you need any further information or documentation, please do not hesitate to contact me.

Thank you for your assistance.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]

[Your Policy Number]