

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]

[Insurance Company Name]  
[Insurance Company Address]  
[City, State, Zip Code]

Subject: Appeal for Motorcycle Insurance Claim Denial - [Claim Number]

Dear [Insurance Adjuster's Name],

I hope this letter finds you well. I am writing to formally appeal the denial of my motorcycle insurance claim, referenced under claim number [Claim Number].

On [Date of Incident], my motorcycle was involved in an incident that I believe should be covered under my policy, number [Policy Number]. I have reviewed the denial notice dated [Date of Denial], and I respectfully disagree with the decision based on the following reasons:

1. [Reason 1: Provide a clear and concise explanation]
2. [Reason 2: Provide any additional relevant information or evidence]
3. [Reason 3: Mention any supporting documentation attached]

I have attached [list any documents, photographs, or evidence you are including] that further substantiate my claim. I kindly request that you review my appeal and reconsider the decision regarding my claim.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Signature (if sending a hard copy)]  
[Your Printed Name]