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

Subject: Insurance Claim Application - Policy No. [Your Policy Number] I am writing to formally submit my claim for [briefly describe the nature of the claim, e.g., "medical expenses incurred due to an accident" or "property damage from a fire"].

On [date of incident], [briefly describe what happened and any relevant details]. Following this, I have attached the necessary documents, including:

- 1. Claim form
- 2. Copy of insurance policy
- 3. Incident report
- 4. Medical bills/repair quotes/photos (as applicable)

I request your prompt attention to this matter and would appreciate any updates regarding the status of my claim. Please feel free to contact me at [your phone number] or [your email address] should you require any additional information.

Thank you for your assistance.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]