

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Workers' Compensation Insurance Company Name]
[Insurance Company Address]
[City, State, Zip Code]
Subject: Workers' Compensation Resolution Request - Claim #[Claim Number]
Dear [Adjuster's Name or General "Claims Adjuster"],
I hope this letter finds you well. I am writing to formally address my
workers' compensation claim filed on [date of injury/claim] regarding
[brief description of injury].
As of today, I would like to request a resolution for the following
reasons:
1. [Reason 1: Briefly explain the first reason or situation]
2. [Reason 2: Briefly explain the second reason or situation]
3. [Additional reasons if necessary]
Attached, you will find pertinent documentation that supports my case,
including:
- [List documents: e.g., medical reports, bills, previous correspondence,
etc.]
I believe that this documentation clearly illustrates the impact of my
injury on my life and work capacity, warranting a consideration for
resolution. I look forward to your prompt response and a fair resolution
to my claim.
Thank you for your attention to this matter.
Sincerely,
[Your Signature (if sending a hard copy)]
[Your Printed Name]