(Date of Letter)

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(Insurance Company Name)
Attn: Claims Department
(Street Address)
(City, State and Zip Code)
RE:
      (Name of Insured)
      (Claim Number)
      (Date of Loss)
      (Property Damage Claim)
Dear Claims Adjuster:
     Kindly accept and acknowledge this correspondence as notice of a property
damage loss sustained under the terms and conditions of the above-referenced
policy. The particular loss in this case occurred on or about the
                                                                          day of
                     (month/year), at
(location of loss). The damage sustained in this case includes damage to each of
the following (circle where appropriate):
      1.
          HOME EXTERIOR:
      2.
           HOME INTERIOR:
      3.
           HOME ROOF:
      4.
           HOME BASEMENT:
      5.
           GARAGE:
           HOME CONTENTS:
      6.
      7. HOME FIRE:
      8.
           AUTO EXTERIOR:
      9.
           AUTO INTERIOR:
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10.

11.

AUTO CONTENTS:

12. OFFICE INTERIOR:

OFFICE EXTERIOR:

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13. OFFICE CONTENTS:
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- 14. PERSONAL PROPERTY (Described as):
- 15. OUTBUILDINGS (Described as):
- 16. MACHINERY (Described as):
- 17. EQUIPMENT (Described as):
- 18. OTHER: (Specify)

Repairs to the foregoing (are)/(are not) possible. Estimates for repair and/or replacement of the aforementioned items are enclosed for your file and review. Please note that the enclosures are based upon a fair and reasonable repair and/or replacement cost and have been completed by bona fide parties with the capacity to make the repairs and/or replacements.

Your immediate attention is requested due to the fact that the repairs and/or replacements are vitally needed at this time in order to avoid further damage and/or loss. Due to the seriousness of the loss and due to the immediate need for repair and/or replacement, your early attention to this matter is mandated. Please be assured that the undersigned will cooperate in every way possible in order to expedite this claim. Therefore, should your office need any additional information, please advise. Thank you for your anticipated early response.

Very truly yours,

(Signature)

(Address)

(City, State and Zip Code)

(Phone Number)

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This is not a substitute for legal advice. An attorney must be consulted.