

Personal Injury Claim Letter

Date: [Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

Claims Department

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear Claims Adjuster,

I am writing to formally submit my personal injury claim resulting from a slip and fall incident that occurred on [date of the incident] at [location of the incident]. As a result of the fall, I sustained injuries including [briefly describe injuries].

On the day of the incident, [describe the circumstances surrounding the slip and fall, including any contributing factors and witnesses if applicable]. I believe that [explain why you are holding the other party liable for the incident].

Enclosed with this letter are the following documents to support my claim:

- Medical records and bills related to my treatment
- Photos of the incident scene
- Witness statements
- Any relevant accident reports

Given the circumstances, I believe that compensation for my medical expenses, lost wages, and pain and suffering is warranted. I would appreciate prompt attention to this matter and look forward to your response.

Thank you for your consideration.

Sincerely,

[Your Signature (if sending by mail)]

[Your Printed Name]