

# Public Liability Claim for Personal Injury

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

## Subject: Public Liability Claim for Personal Injury

Dear [Claims Adjuster's Name],

I am writing to formally submit a claim for personal injury under your public liability policy, following an incident that occurred on [date of incident] at [location of incident].

During this incident, I suffered [brief description of injuries], which have required [medical treatment details]. The incident was witnessed by [names/contact information of witnesses, if applicable].

I am including copies of all relevant documentation with this letter, including:

- Medical reports and bills
- Photographs of the incident and injuries
- Witness statements
- Any correspondence related to the incident

Due to this incident, I have incurred significant medical expenses and have also experienced [details of lost wages/emotional distress, if applicable]. I request that you investigate this claim promptly and advise me of your findings. I am seeking compensation for my medical bills, lost wages, and pain and suffering.

Please feel free to contact me at [your phone number] or [your email address] should you require any further information. I look forward to your timely response.

Thank you for your attention to this matter.

Sincerely,

[Your Name]