

Public Liability Claim for Slips and Falls

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

[Date]

[Insurance Company Name]
[Insurance Company Address]
[City, State, Zip Code]

Dear [Claims Adjuster Name],

I am writing to formally submit a public liability claim regarding an incident that occurred on [date of incident] at [location of incident]. I experienced a slip and fall due to [briefly describe the cause, e.g., wet floor, uneven pavement].

As a result of this incident, I sustained the following injuries: [list injuries]. I have attached medical records and bills detailing the treatment received.

I believe that the circumstances surrounding my accident clearly fall under your liability, and I am requesting compensation for my medical expenses, lost wages, and any pain and suffering I have endured.

Please find attached all relevant documentation including photographs of the incident site, medical reports, and any witness statements.

I look forward to your prompt response so we can resolve this matter amicably.

Thank you for your attention to this important issue.

Sincerely,
[Your Signature (if sending by mail)]
[Your Printed Name]