

Letter of Clarification Regarding Insurance Claim Denial

[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's Name],

I am writing to formally request clarification regarding the denial of my insurance claim, claim number [Claim Number], submitted on [Date of Claim Submission].

According to your letter dated [Date of Denial Letter], my claim was denied due to [reason for denial]. However, I would like to provide additional information that may clarify the circumstances surrounding my claim.

[Briefly explain your side of the story, providing any relevant facts, documents, or evidence to support your case.]

I believe this information will support the validity of my claim and I kindly ask you to review the details again. I appreciate your attention to this matter and look forward to your prompt response.

Thank you for your consideration.

Sincerely,

[Your Name]