## **Your Name**

Your Address

City, State, Zip Code

**Email Address** 

Phone Number

Date

## **Insurance Company Name**

**Insurance Company Address** 

City, State, Zip Code

## **Subject: Dispute Regarding Insurance Policy Coverage Limits**

Dear [Insurance Company Representative's Name],

I am writing to formally dispute the coverage limits stated in my insurance policy, policy number [Your Policy Number]. I was recently informed that my claim was adjusted based on limits that do not align with the terms outlined in my policy.

According to my understanding of the policy documentation, specifically section [specify section], my coverage should extend to [describe the coverage in question]. However, I have been informed that the maximum payout is [state maximum payout given], which is substantially less than what was originally agreed upon.

For your reference, I have attached copies of relevant documents, including my policy declaration page and any communication regarding this issue. I kindly request a thorough review of my policy and the circumstances regarding this dispute.

Please respond to my inquiry at your earliest convenience. I hope to resolve this matter amicably and look forward to your prompt reply.

Thank you for your attention to this important matter.

Sincerely,

[Your Name]