

Vehicle Insurance Policy Coverage Disagreement

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Insurance Company Representative's Name],

I hope this message finds you well. I am writing to formally express my disagreement regarding the coverage provided in my vehicle insurance policy, policy number [Insert Policy Number].

Upon reviewing my policy documentation and considering my recent claim, I believe there has been a misunderstanding regarding the coverage details. Specifically, I am concerned about [briefly describe the specific disagreement, e.g., "the denial of coverage for the accident that occurred on [Insert Date]"].

I kindly request a thorough review of my policy and the circumstances surrounding my claim. Attached are copies of all relevant documents, including my initial claim submission and any correspondence related to this matter.

I appreciate your attention to this issue and look forward to your prompt response. Thank you for your assistance.

Sincerely,

[Your Name]