

Vehicle Insurance Policy Settlement Dispute

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 am writing to formally dispute the settlement offer regarding my vehicle insurance policy associated with policy number [Insert Policy Number].

On [Insert Date of Incident], my vehicle was involved in an accident, and I submitted a claim (Claim Number: [Insert Claim Number]) for damages incurred. After reviewing the settlement offer provided on [Insert Offer Date], I believe the assessment of damages does not adequately reflect the true cost of repairs.

According to my research and repair estimates obtained from authorized service centers, the actual cost to repair my vehicle amounts to [Insert Amount]. However, the settlement offer made by [Insurance Company Name] is only [Insert Offered Amount], which I find insufficient to cover the necessary repairs.

I kindly request a detailed breakdown of how the settlement amount was determined and a reconsideration of my claim based on the evidence I am enclosing, which includes [mention any enclosed documents, such as repair estimates or additional evidence].

I appreciate your attention to this matter and look forward to a prompt resolution. Please feel free to contact me at [Your Phone Number] or [Your Email Address] should you require any further information.

Thank you for your cooperation.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]