

Pet Insurance Claim for Surgical Intervention

To Whom It May Concern,

I am writing to submit a claim under my pet insurance policy for the surgical intervention performed on my pet due to an illness.

Policyholder Name: [Your Name]

Policy Number: [Your Policy Number]

Pet's Name: [Your Pet's Name]

Pet's Type: [Dog/Cat/Breed]

Date of Surgery: [Surgery Date]

Veterinary Clinic Name: [Veterinary Clinic Name]

Veterinarian Name: [Veterinarian Name]

The surgery was necessary due to [brief description of the illness], and all relevant medical records, bills, and documentation from the veterinary clinic are attached for your review.

Please let me know if you need any more information to process this claim. You can reach me at [Your Phone Number] or [Your Email Address].

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Address]

[City, State, ZIP Code]