

# Appeal for Retroactive Flood Insurance Benefits

Your Name  
Your Address  
City, State, Zip Code  
Email Address  
Phone Number  
Date

Claims Department  
Insurance Company Name  
Insurance Company Address  
City, State, Zip Code

Dear Claims Department,

I am writing to formally appeal the denial of my claim for retroactive flood insurance benefits under policy number [Your Policy Number]. As you are aware, my property located at [Property Address] was significantly impacted by the flooding that occurred on [Flood Date].

Despite filing my claim on [Claim Filing Date], I received a denial letter dated [Denial Letter Date], which stated that my claim did not meet the coverage criteria. However, I believe there has been a misunderstanding and would like to present additional information supporting my case.

[Briefly outline the reasons for your appeal, including any new evidence, documentation, or relevant personal circumstances that should be considered.]

In accordance with [relevant regulation or guideline, if applicable], I kindly request a thorough reassessment of my claim based on the information provided in this letter and enclosed documents.

Thank you for your attention to this matter. I look forward to your prompt response regarding my appeal.

Sincerely,

[Your Name]