

Commercial Auto Insurance Claim

Date: [Insert Date]

To: [Insurance Company Name]

Attn: Claims Department

Address: [Insurance Company Address]

Policy Number: [Insert Policy Number]

Claim Number: [Insert Claim Number]

Dear Claims Adjuster,

I am writing to formally submit a claim for vehicle repair costs related to my commercial auto insurance policy. The details of the incident are as follows:

- **Date of Incident:** [Insert Date]
- **Location of Incident:** [Insert Location]
- **Vehicle Make and Model:** [Insert Vehicle Make and Model]
- **Involved Parties:** [List Any Other Parties Involved]

Details of the incident: [Provide a brief description of the incident and any damages incurred].

The estimated cost for repairs is [Insert Amount], supported by the attached repair estimates from [Insert Garage/Repair Shop Name]. I kindly ask you to review the attached documentation and process my claim promptly.

Thank you for your attention to this matter. Should you require any further information, please do not hesitate to contact me at [Insert Phone Number] or [Insert Email Address].

Sincerely,

[Your Name]

[Your Position/Title]

[Your Company Name]

[Your Company Address]