

# Settlement Demand Letter

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Phone Number]

[Your Email Address]

[Insurance Company's Name]

[Insurance Company's Address]

[City, State, Zip Code]

Dear [Adjuster's Name],

I am writing to formally demand a settlement for the personal injuries I sustained on [Date of Incident] due to the negligence of your insured, [Name of the At-Fault Party].

On the date of the accident, I was [describe how the accident occurred]. As a result of this incident, I suffered [list injuries] and incurred significant medical expenses totaling [amount]. My medical treatment included [list treatments and procedures].

In addition to my medical expenses, I have also faced [lost wages, pain and suffering, etc.], which I believe warrant compensation. Thus, I am seeking a total settlement of [total amount requested].

Attached are documents supporting my claim, including medical records, bills, and proof of lost income. I would appreciate your prompt attention to this matter, and I am hopeful for a swift resolution.

Please feel free to contact me at [Your Phone Number] or [Your Email Address] to discuss this further.

Sincerely,

[Your Signature (if sending hard copy)]

[Your Printed Name]