

Receipt of Accident Claim Application

Date: [Date]

Claim Number: [Claim Number]

To: [Claimant's Name]

Address: [Claimant's Address]

Dear [Claimant's Name],

We acknowledge the receipt of your accident claim application submitted on [Submission Date]. Your claim is currently under review, and we will keep you updated on its progress.

Please find below the details of your claim:

- **Claim Type:** [Type of Claim]
- **Date of Accident:** [Date of Accident]
- **Description of Incident:** [Brief Description]

If you have any questions or require further assistance, please do not hesitate to contact us at [Contact Information].

Thank you for your patience.

Sincerely,

[Your Company Name]

[Your Company Address]

[Your Company Contact Information]