

Claim Appeal Letter

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

[Insurance Company Name]
[Insurance Company Address]
[City, State, Zip Code]

Dear [Claims Adjuster's Name],

Subject: Appeal of Claim Denial - Policy No. [Your Policy Number]

I am writing to formally appeal the denial of my home insurance claim (Claim No. [Claim Number]) submitted on [Date of Initial Claim Submission]. I was informed of the decision on [Date of Denial Notification], and I respectfully disagree with the reasoning provided.

In your letter, it was stated that [Explain the reason for denial]. However, I believe that my claim was valid based on [Provide specific reasons, policy clauses, or evidence supporting your claim].

Attached to this letter are copies of relevant documentation, including [List any documents: police reports, photographs, repair estimates, etc.]. These documents provide additional evidence that supports my position.

I kindly ask that you review my claim once more in light of the information provided. I appreciate your attention to this matter and look forward to your prompt response.

Thank you for your consideration.

Sincerely,
[Your Signature (if sending a hard copy)]
[Your Name]