

Appeal for Income Protection Insurance Claim

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Subject: Appeal for Claim #[Claim Number]

Dear [Claims Adjuster's Name],

I am writing to formally appeal the denial of my income protection insurance claim, referenced above, which was submitted on [Date of Original Claim Submission]. I was notified of the claim denial on [Date of Denial Notification].

Upon reviewing the explanation provided in the denial letter, I would like to present additional information and documentation that supports my case. [Briefly explain your situation and the reasons for your appeal, referencing any specific details from your policy and additional evidence you are including.]

Attached to this letter are the following documents for your review:

- [Document 1]
- [Document 2]
- [Document 3]

Based on the evidence and the terms outlined in my policy, I believe that my claim meets the requirements for approval. I kindly request that you review this appeal and reconsider my claim for benefits.

Thank you for your prompt attention to this matter. I look forward to your favorable response.

Sincerely,

[Your Name]