

Liability Claim Letter for Personal Injury

Your Name
Your Address
City, State, ZIP Code
Email Address
Phone Number
Date

Insurance Company Name
Insurance Company Address
City, State, ZIP Code

Subject: Liability Claim for Personal Injury - Claim No. [Claim Number]

Dear [Adjuster's Name or Claims Department],

I am writing to formally submit a liability claim following an incident that occurred on [Date] at [Location]. As a result of this incident, I sustained injuries which have caused me significant physical pain, emotional distress, and financial costs.

Details of the Incident:

- Date and Time: [Date and Time]
- Location: [Location]
- Description of Incident: [Briefly describe what happened, including any relevant details]

The injuries I sustained include [list injuries]. I have attached copies of my medical records, bills, and any relevant documentation that supports my claim.

Due to the injuries sustained, I have incurred medical expenses totaling [amount], and I have also lost wages amounting to [amount] as a result of my inability to work.

I kindly request a prompt review of my claim and look forward to your response. Please feel free to contact me at [Your Phone Number] or [Your Email Address] should you need any further information.

Thank you for your attention to this matter.

Sincerely,
[Your Name]