

Business Liability Insurance Claim for Loss of Income

Date: [Insert Date]

[Your Name]

[Your Position]

[Your Company Name]

[Your Company Address]

[City, State, Zip Code]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Claims Adjuster's Name],

I am writing to formally submit a claim under our business liability insurance policy [Policy Number] for loss of income due to [brief explanation of the incident, e.g., an accident that occurred on our premises on [Date]].

As a result of this incident, our business experienced a significant decrease in revenue, and I am seeking compensation for the loss of income incurred from [start date] to [end date]. During this period, we experienced a total revenue loss of [amount].

Attached to this letter, you will find supporting documentation including:

- Financial statements for the relevant period
- Incident report
- Any correspondence related to this matter

I kindly ask that you review my claim and provide guidance on the next steps. I am available for any further information or documentation you may require.

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

Sincerely,

[Your Name]

[Your Position]

[Your Company Name]

[Your Phone Number]

[Your Email Address]