

# Business Liability Insurance Claim

Date: [Insert Date]

[Your Name]

[Your Position]

[Your Company Name]

[Your Company Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Claims Adjuster's Name],

I am writing to formally submit a claim regarding an incident that occurred on [date of the incident] related to our professional services. The details of the incident are as follows:

## **Incident Description:**

[Provide a detailed description of the incident, including what happened, the parties involved, and any repercussions.]

## **Policy Information:**

Policy Number: [Insert Policy Number]

Claim Number: [Insert Claim Number] (if applicable)

## **Supporting Documents:**

- [List of documents such as contracts, correspondence, invoices, or photographs.]

Your prompt attention to this matter is greatly appreciated, and I look forward to your response.

Thank you for your assistance.

Sincerely,

[Your Name]

[Your Position]

[Your Company Name]