

# Business Liability Insurance Claim

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 an incident that occurred on [Date of Incident]. This incident involved [brief description of the incident, e.g., a slip and fall that resulted in bodily injury].

Attached, please find the supporting documentation for this claim, which includes:

- Incident Report
- Medical Records pertaining to the injured party
- Photographs of the incident scene
- Witness Statements
- Correspondence with the injured party

We believe that the circumstances surrounding this incident warrant a thorough review and are hopeful for an expedient resolution of this claim.

Thank you for your attention to this matter. Should you require any additional information, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Name]

[Your Position]

[Your Company Name]