

# Insurance Hold Request for Claim Resolution

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Insurance Company Contact/Claims Adjuster],

I am writing to formally request a hold on my insurance claim #[Claim Number] regarding [Brief Description of Claim]. Due to [specific reason for request], I believe it is essential to pause the current proceedings of the claim at this time.

I am currently in the process of [additional details or reasons for the hold], which I hope to resolve shortly. Therefore, I request that you place a temporary hold on any actions regarding my claim until [specific date or condition].

Thank you for your attention to this matter. Please confirm receipt of this request and the status of my claim at your earliest convenience.

Sincerely,

[Your Name]