

# Insurance Claim Dispute Letter

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Your Email Address]

[Your Phone Number]

[Insurance Company's Name]

[Insurance Company's Address]

[City, State, ZIP Code]

Subject: Dispute of Claim Settlement - Policy Number: [Insert Policy Number]

Dear [Insurance Adjuster's Name],

I am writing to formally dispute the settlement offer made regarding my residential insurance claim, [Claim Number], filed on [Date of Claim]. I believe the assessment of my claim does not accurately reflect the damages incurred.

Upon receiving your letter dated [Date of Insurance Company's Letter], which outlined your findings, I carefully reviewed the details and found the following discrepancies [list specific items or reasons for dispute clearly].

Given this information, I kindly request a reevaluation of my claim. I have included copies of [list any supporting documents, like estimates, photographs, or quotes], which support my position.

I appreciate your attention to this matter and look forward to your prompt response. Please feel free to contact me at [Your Phone Number] or [Your Email Address] should you require any further information.

Thank you for your understanding.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]