

Residential Insurance Claim Outcome Notification

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Claim Adjuster's Name]

[Insurance Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Claim Adjuster's Name],

Re: Claim Number [Insert Claim Number]

We are writing to inform you of the outcome of your residential insurance claim submitted on [Insert Submission Date]. After careful review and consideration of the details provided, we have reached a decision.

Your claim has been [approved/denied] due to [brief explanation of reasons].

If your claim has been approved, the payout amount is [Insert Amount] and will be processed within [Insert Time Frame]. If your claim has been denied, you may wish to review our policy terms or contact us for further clarification.

We appreciate your patience throughout this process, and please do not hesitate to reach out with any questions or for additional assistance.

Sincerely,

[Your Name]

[Your Title/Position]

[Insurance Company Name]