

Your Name
Your Address
City, State, ZIP Code
Email Address
Phone Number
Date

Insurance Company's Name
Insurance Company's Address
City, State, ZIP Code

Dear Claims Adjuster,

I am writing to formally withdraw my claim for residential insurance, Claim Number: [Insert Claim Number], submitted on [Insert Date of Claim]. After careful consideration, I have decided not to pursue the claim any further.

I appreciate the assistance provided by your team during this process. Please confirm the withdrawal of this claim at your earliest convenience.

Thank you for your understanding.

Sincerely,
[Your Name]