

# Formal Complaint Regarding Insurance Dispute

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Company Name]

[Insurance Company Address]

[City, State, ZIP Code]

Subject: Formal Complaint Regarding Insurance Claim Dispute

Dear [Insurance Company Representative's Name],

I am writing to formally express my dissatisfaction regarding the handling of my insurance claim (Claim Number: [Your Claim Number]). Despite multiple communications regarding this matter, I have not received a satisfactory resolution.

On [Date of Incident], I submitted a claim for [brief description of the claim]. However, my claim has been delayed due to [explain the reason cited by the insurance company]. I believe that the denial/delay of my claim is unjustified based on the following reasons: [list reasons or evidence supporting your case].

As a policyholder, I expect transparent communication and fair treatment from your company. Therefore, I am requesting a thorough review of my claim and a timely resolution. I have attached all relevant documents for your reference.

Please respond to this letter within [number of days, typically 15 or 30] days of receipt. If I do not receive an adequate response, I will consider escalating this matter further, including seeking assistance from regulatory authorities or legal counsel.

Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]