

# Request for Claim Documentation

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 Claims Department,

I am writing to formally request documentation necessary to proceed with my long-term care insurance claim (Claim Number: [Insert Claim Number]). I would like to ensure that all required information is provided to expedite the processing of my claim.

Specifically, I would appreciate receiving the following documentation:

- Proof of eligibility for benefits
- Details of the policy coverage
- Records of any previous claims filed
- Any additional forms or documentation required for my claim

Thank you for your attention to this matter. I look forward to your prompt response so that I can ensure a smooth claims process.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]