

# Personal Accident Insurance Claim

Claim Number: [Claim Number]

Date: [Date]

To,  
The Claims Department,  
[Insurance Company Name]  
[Insurance Company Address]

Subject: Personal Accident Insurance Claim

Dear Sir/Madam,

I am writing to formally submit my claim for personal accident insurance under policy number [Policy Number]. On [Date of Accident], I was involved in an accident that resulted in [brief description of injuries].

Attached to this letter, you will find all the necessary documentation to support my claim, including:

- Medical reports
- Hospital admission records
- Police report (if applicable)
- Proof of identity
- Claim form (completed)

I request you to process my claim at your earliest convenience. Feel free to contact me at [Your Phone Number] or [Your Email Address] should you require any further information.

Thank you for your attention to this matter. I look forward to your prompt response.

Yours sincerely,  
[Your Name]  
[Your Address]  
[Your City, State, Zip Code]