

Insurance Adjustment Challenge

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Claims Adjuster's Name],

I am writing to formally challenge the adjustment made on my claim, [Claim Number], regarding [Brief Description of the Incident]. I believe that the assessment of the damages and the compensation offered does not accurately reflect the losses I have incurred.

Upon reviewing the documentation and the adjuster's report, I noticed discrepancies that warrant reconsideration. Specifically, [Detail the specific issues or points of contention, such as undervaluation of damages, incorrect information, etc.]. I have attached supporting documents to substantiate my claims.

I kindly request a re-evaluation of my claim considering the information provided. I am hopeful we can resolve this matter amicably and reach a fair settlement.

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

Sincerely,

[Your Name]

[Your Policy Number]