

# Homeowner's Insurance Appeal Procedure

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Insurance Company's Name]

[Insurance Company's Address]

[City, State, ZIP Code]

Subject: Appeal for [Policy Number]'s Claim Denial

Dear [Insurance Adjuster's Name],

I am writing to formally appeal the denial decision regarding my homeowner's insurance claim (Claim Number: [Insert Claim Number]) dated [Insert Date of Denial].

I believe that my claim was mistakenly denied due to [briefly explain reason if known, e.g., lack of sufficient documentation, misunderstanding of coverage, etc.]. According to my policy, [briefly point out relevant policy terms].

Please find attached supporting documentation, including [list any attached documents, e.g., photographs, receipts, expert opinions, etc.], to help clarify the situation. I respectfully request a review of my case.

Thank you for your attention to this matter. I look forward to a prompt response regarding my appeal.

Sincerely,

[Your Name]

[Your Phone Number]

[Your Email Address]