Accident Claim Adjustment Request

Claim Number: [Insert Claim Number]

To: [Insurance Company Name]

Address: [Insurance Company Address]

Dear [Claims Adjuster's Name],

Date: [Insert Date]

I am writing to formally request an adjustment to my accident claim [Claim Number] regarding the incident that occurred on [Date of Accident]. While I have received compensation for my physical injuries, I believe that the emotional distress I have experienced as a result of this accident warrants additional consideration and adjustment of my claim.

The accident has caused me significant emotional pain and suffering, including but not limited to anxiety, sleeplessness, and a general decline in my quality of life. I have sought professional counseling to cope with these feelings, which has incurred additional expenses.

Attached to this letter, you will find documentation outlining my emotional distress, including records from my therapist and any related medical expenses. I hope you will take this into account as you review my request for additional compensation.

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

Sincerely,

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Phone Number]

[Your Email Address]