

Accident Claim Adjustment Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Claims Adjuster's Name],

I am writing to formally request an adjustment to my accident claim regarding property damage, claim number [Insert Claim Number]. The incident occurred on [Insert Date of Accident], and I appreciate your prompt attention to this matter.

As per the initial assessment, the damages to my property have been evaluated at [Insert Initial Evaluation Amount]. However, after further review and obtaining estimates from qualified contractors, the total cost for repairs amounts to [Insert New Estimated Amount].

Enclosed are the documentation and estimates from the contractors supporting this adjustment request:

- Photos of the damage
- Repair estimates
- Invoice for services

I kindly ask you to review the attached documents and reassess my claim accordingly. I appreciate your assistance in this matter and look forward to your timely response.

Thank you for your attention to this request.

Sincerely,

[Your Name]