

Cargo Insurance Claim for Total Loss of Shipment

Date: [Insert Date]

To,

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Subject: Cargo Insurance Claim for Total Loss of Shipment

Dear [Claims Adjuster's Name],

I am writing to formally submit a claim for the total loss of shipment under policy number [Insert Policy Number]. The shipment in question was entrusted to [Carrier Name] with a Bill of Lading number [Insert Bill of Lading Number] and was scheduled for delivery to [Destination Address].

The shipment was reported lost on [Insert Date of Loss] due to [briefly explain cause of loss, e.g., theft, fire, sinking]. Despite all efforts to locate the cargo, it has been concluded that the shipment is a total loss.

Attached are relevant documents to support this claim, including:

- Copy of the insurance policy
- Bill of Lading
- Invoice for goods
- Loss report from [Carrier Name]
- Any correspondence regarding the loss

Please initiate the claims process at your earliest convenience. I kindly request that you confirm receipt of this claim and keep me updated on its status. Should you require any further information or documentation, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].

Thank you for your prompt attention to this matter.

Sincerely,

[Your Name]

[Your Company Name]

[Your Address]

[City, State, Zip Code]

[Your Phone Number]

[Your Email Address]