

Personal Injury Claim Submission

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Subject: Personal Injury Claim for Slip and Fall Incident

Dear [adjuster's name or "Claims Department"],

I am writing to formally submit a personal injury claim for the slip and fall incident that occurred on [date of incident] at [location of incident]. As a result of this incident, I sustained [describe injuries].

Details of the incident:

- Date of Incident: [Insert Date]
- Time of Incident: [Insert Time]
- Location: [Insert Location]
- Description of the Incident: [Brief description of how the accident occurred]

Enclosed are the following documents:

- Medical records and bills related to my treatment
- Incident report
- Photographs of the scene
- Witness statements (if available)

I would appreciate your prompt attention to this matter. Please contact me at [Your Phone Number] or [Your Email] if you require any further information or clarification.

Thank you for your assistance.

Sincerely,

[Your Name]