

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Company Name]

[Claims Department Address]

[City, State, ZIP Code]

Subject: Rebuttal for Claim Number [Claim Number]

Dear [Claims Adjuster's Name],

I am writing to formally submit my rebuttal regarding the recent decision made on my insurance claim, number [Claim Number], dated [Claim Date]. I appreciate your review of my case; however, I believe there has been a misunderstanding regarding the circumstances surrounding my claim.

[Include details of the claim, the reasons for denial, and evidence supporting your claim. Be specific and concise. Attach any supporting documents, if necessary.]

Given the above information, I respectfully request a re-evaluation of my claim. I believe the evidence provided will clearly support my case and justify the approval of my claim.

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

Sincerely,

[Your Signature (if sending by mail)]

[Your Printed Name]