Aviation Injury Claim Application

Date: [Insert Date]
[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
To: [Insurance Company's Name]
[Insurance Company's Address]
[City, State, Zip Code]

Subject: Claim Application for Aviation Injury

Dear [Recipient's Name],

I am writing to formally submit my claim for injuries sustained during an aviation incident that occurred on [Date of Incident] involving [Flight Details or Aircraft]. As a result of this incident, I have experienced significant physical and emotional distress, documented in the enclosed medical reports and other relevant documents.

Details of the Incident:

- Date of Incident: [Insert Date]
- Flight Number: [Insert Flight Number]
- Aircraft Type: [Insert Aircraft Type]
- Description of the Event: [Brief description of the incident]

Injuries Sustained:

- [Injury 1]
- [Injury 2]
- [Injury 3]

Attached you will find copies of the necessary documentation, including:

Medical reports

- Incident reports
- Proof of damages and expenses incurred

I respectfully request that you process my claim at your earliest convenience. 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]