

Insurance Claim Dispute Letter

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Company Name]

[Insurance Company Address]

[City, State, ZIP Code]

Subject: Dispute of Claim Denial - Policy #[Your Policy Number]

Dear [Claims Adjuster's Name or Insurance Company],

I am writing to formally dispute the denial of my claim submitted on [Date of Claim Submission] regarding my home insurance policy #[Your Policy Number]. The claim, referenced as [Claim Number], pertains to [briefly describe the nature of the claim, e.g., water damage from a burst pipe].

After reviewing the communication regarding the denial dated [Date of Denial Letter], I believe that the decision was made in error based on the following reasons:

- [Reason 1: e.g., details of policy coverage that applies]
- [Reason 2: e.g., additional evidence or documentation supporting your claim]
- [Any other pertinent information]

I have attached [list any documents you are including such as photographs, repair estimates, or expert evaluations] to support my case. I kindly request a reevaluation of this claim and hope for an expedited resolution.

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

Sincerely,

[Your Name]