## **Insurance Coverage Assessment Request for Clarification**

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Insurance Adjuster Name],

I hope this message finds you well. I am writing to request clarification regarding my insurance coverage assessment related to [specific policy or claim number]. I would appreciate your assistance in understanding the details and limitations of my current coverage.

Specifically, I would like to clarify the following:

- [First point of clarification]
- [Second point of clarification]
- [Third point of clarification]

Your prompt response would be greatly appreciated as it will help me in making informed decisions regarding my policy. Thank you for your attention to this matter.

Sincerely,

[Your Name]