

Insurance Claim Notification

Date: [Insert Date]

To: [Insurance Company Name]

From: [Your Name]

Policy Number: [Your Policy Number]

Claim Number: [Insert Claim Number]

Dear [Insurance Adjuster's Name],

I am writing to formally notify you of an accident that occurred on [Insert Accident Date] involving my vehicle, [Insert Vehicle Make and Model], with license plate number [Insert License Plate Number].

The accident took place at [Insert Location] and was caused by [Briefly describe circumstances of the accident]. I have attached a copy of the police report and any other relevant documents for your review.

Please let me know what additional information or documentation you require to process my claim. I expect to hear back from you shortly regarding the next steps in this process.

Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]

[Your Address]

[Your Phone Number]

[Your Email Address]