

Insurance Claim Dispute Resolution Steps

Date: [Insert Date]

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

[Insurance Company Name]
[Insurance Company Address]
[City, State, Zip Code]

Dear [Claims Adjuster's Name],

Re: Claim Number [Your Claim Number]

I am writing to formally dispute the decision made regarding my claim for [brief description of the claim, e.g., "water damage in my residence"]. I believe that the denial of my claim does not accurately reflect the terms of my insurance policy and I would like to outline the steps for resolution.

Dispute Resolution Steps:

1. **Review Policy Documents:** I will carefully review the policy documents to ensure I fully understand the coverage provided.
2. **Gather Evidence:** I will compile all relevant evidence, including photos, repair estimates, and any correspondence related to the claim.
3. **Request an Explanation:** I will request a detailed explanation of the reason for the denial.
4. **Contact Customer Service:** I will reach out to your customer service line for further clarification and support.
5. **Formal Appeal:** If necessary, I will submit a formal appeal with all supporting documentation.
6. **Mediation or Arbitration:** Should the issue remain unresolved, I may consider mediation or arbitration as outlined in my policy.

I appreciate your prompt attention to this matter and look forward to your response.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Printed Name]