

# Document Request for Insurance Claim

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

To: [Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Subject: Request for Required Documents for Claim Processing

Dear [Claims Adjuster's Name],

I am writing to request the necessary documents required for processing my insurance claim, Reference Number: [Insert Claim Number]. To ensure a smooth process, please provide me with the following items:

- Claim Form
- Proof of Loss
- Detailed Itemized List of Damages
- Photos of Damages
- Any Relevant Medical Records

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

Sincerely,

[Your Name]