## Sample Letter for Requesting Copies of Claim-Related Documents

- Use this letter to request copies of documents related to your insurance claim such as inspection reports, estimates, measurements, notes, and damage assessments.
- Use this letter to request a complete copy of your claim file from your insurance company.

NOTE: This letter is a sample that must be customized to fit the facts of your individual situation and claim. All bracketed and underlined portions must be completed or revised before sending.

(Date)	
(Name of adjuster or highest-ranking ins. co. emp (Name of Insurance Co.)	ployee you can identify)
(Address)	
Re: Claim Number	
Date of Loss:	
Name of Insured:	
Address of Insured Property:	
Dear [INSURANCE COMPANY],	

As part of your investigation of our claim, your adjuster and people associated with or hired by your company may have inspected our property, taken notes and written or obtained reports and estimates on the damage. We need to see those reports and estimates so we can be informed and continue cooperating with you on our claim. Thank you in advance for your return cooperation.

Please provide complete copies of our claim file and/or all claim-related documents. For purposes of this request, "claim-related documents" means all documents that relate to the evaluation of damages, including, but not limited to, repair and replacement estimates and bids, appraisals, scopes of loss, drawings, plans, reports, third-party findings on the amount of loss, covered damages, and cost of repairs, and all other valuation, measurement, and loss adjustment calculations of the amount of loss, covered damage, and cost of repairs.

[NOTE: If you live in California, your insurance company is *legally required* to comply with this request by Cal. Ins. Code section 2071 – Requirements in Case Loss Occurs]

Please send these documents to the mailing address listed below within fifteen (15) calendar days of the date of this letter. Thank you in advance for your prompt handling of this request. I look forward to receiving the above-requested documents and working with [INSURANCE COMPANY] to reach a full, fair and timely settlement.

Sincerely, YOUR NAME MAILING ADDRESS

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