February 15, 2023



11785192

Progressive Insurance

800 Progressive Way
  
Suite 150

Marietta, GA 30096

RE: Our Client: Donhav Noname

Your Insured:

Date/Loss: April 25, 2021

Claim No: 21-000001556

Policy No:

Dear Sir or Madam:

**PLEASE NOTE, you may speak with our client regarding their property damage**.

This firm has been retained to represent the above-referenced client in a claim for damages against your insured resulting from an accident which occurred on the above date. Please furnish us with copies of any statements that you have obtained from our client concerning this accident. You are required by law to furnish said copies.

Pursuant to Section 627.4137 of the Florida Statutes, please provide the undersigned with the following information with regard to each known policy of insurance, including excess or umbrella coverage, which may provide liability insurance coverage for this claim.

1. Name of the insurer(s);

2. Name of each insured;

3. Certified copy of limits of liability coverage:

a. personal injury,

b. property damage,

c. medical expenses,

d. personal injury protection,

e. uninsured motorist and any other coverage

4. A statement of any policy or coverage defense which your company reasonably believes is

available; and

5. Certified copy of any and all policies.

Additionally, please provide:

• Copies of all appraisal reports prepared as a result of the property damage to any vehicle involved in the above referenced accident, as well as photographs depicting damages sustained and/or the scene of the accident;

**The requested information must be provided within thirty (30) days from the date of this letter and must include a statement under oath by a corporate officer.**

If you have a medical authorization executed by our client, be advised that it is to be considered void as of this notice of representation. Please send your original signed authorization to our office at your earliest convenience. Failure to comply with this request will result in further action.

**Cell Phone Preservation:**

It is our understanding your insured had a cell phone at the time of the accident. We hereby demand your insured preserve said cell phone and the data on it, in order that we may examine it. If the phone is lost, sold, destroyed or modified before we have had an opportunity to examine/inspect same, it may prejudice our ability to pursue a claim. Instruct your insured on the need to preserve their cell phone, as I expect that it will be both discoverable and admissible in any litigation that may arise out of this claim. Failure to preserve this material will result in a request for a spoliation instruction at any trial in this matter.

**Vehicle/Black Box Preservation**:

As you have anticipated, we wish to arrange an inspection of your insured’s vehicle. I am writing to make certain that your insured/s preserves any and all physical evidence related to this incident. This includes, but is not limited to, the vehicle itself. We would like to schedule a time to have our expert examine the vehicle involved in this loss and are asking that this equipment is preserved until an inspection can take place. We also ask that any and all electronic data be made available for download by our expert at an agreed upon date and time.

Please do not dispose of any of this material, as I expect that it will be both discoverable and admissible in any litigation that may arise out of this claim. Failure to preserve this material will result in a request for a spoliation instruction at any trial in this matter and may ultimately be considered by a court as an attempt to destroy evidence.

Thank you for your attention to this matter. Should you have any questions please contact my Case Manager, Preston Blair in the Palm Harbor office at (901) 333-1823 or email pblair@forthepeople.com.

Sincerely,

Stefanie Young, Esq.

Attorney

SY/pb