

BUSINESS INTERRUPTION CLAIM PRESENTATION

Professional Executive-Level Documentation Package

COVER PAGE

BUSINESS INTERRUPTION INSURANCE CLAIM

Prepared for:

[Insurance Company Name]
Commercial Claims Department

Regarding:

Insured: [Business Legal Name]

Policy Number: [Number]

Claim Number: [Number]

Date of Loss: [Date]

Total Claim Amount: \$[Amount]

Submitted by:

[Your Name/Title]
[Business Name]
[Date]

Professional Representatives:

- Forensic Accountant: [Name/Firm]
 - Public Adjuster: [Name/License #]
 - Attorney: [Name/Firm] (if applicable)
-

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1. EXECUTIVE SUMMARY

Critical Points for Management Review

THE SITUATION On [Date], our business operations were devastated by [specific peril], forcing an immediate [complete/partial] shutdown of operations. This insured loss has resulted in quantifiable damages totaling **\$[Total Amount]**, all fully documented and within policy limits.

KEY IMPACTS

- **Revenue Loss:** \$[Amount] in lost business income over [period]
- **Fixed Costs:** \$[Amount] in continuing expenses that could not be avoided
- **Extra Expenses:** \$[Amount] invested to minimize losses and expedite recovery
- **Market Position:** [Quantified impact on market share, customer base]

IMMEDIATE NEEDS

1. **Advance Payment:** \$[Amount] required within [timeframe] to:
 - Meet critical financial obligations
 - Maintain workforce
 - Secure temporary operations
 - Prevent cascade business failure
2. **Full Settlement Timeline:** Complete resolution needed by [Date] to ensure business survival

CLAIM VALIDITY

- ✓ All losses stem from covered physical damage
- ✓ Calculations follow industry-standard methodologies
- ✓ Documentation meets or exceeds policy requirements

- ✓ Mitigation efforts have reduced overall claim by approximately \$[Amount]
- ✓ All amounts are within policy limits and sublimits

BOTTOM LINE This claim represents the minimum amount necessary for business survival and recovery. Prompt payment is critical to prevent permanent business failure and additional economic damage to our employees, customers, and community.

2. BUSINESS OVERVIEW

Company Profile

ESTABLISHMENT & REPUTATION [Business Name] has operated successfully since [Year], building a reputation for [key strengths]. Prior to this loss, we were recognized as [awards, rankings, industry position].

OPERATIONAL METRICS (Pre-Loss)

| Metric | Value | Industry Ranking |
|----------------|-----------------|-------------------------|
| Annual Revenue | [\$[Amount]] | [Top X%] |
| Employees | [Number] FTE | [Ranking if applicable] |
| Locations | [Number] | N/A |
| Customer Base | [Number] active | [Growth rate] |
| Market Share | [%] | [Position] |

FINANCIAL STRENGTH (Pre-Loss)

- **Revenue Growth:** [%] annually over past [years]
- **Profit Margin:** [%] (Industry average: [%])
- **Credit Rating:** [Rating]
- **Banking Relationships:** [Years] with [Bank names]
- **Debt Service Coverage:** [Ratio]

ECONOMIC CONTRIBUTION

- **Local Employment:** [#] jobs, \$[Amount] annual payroll
- **Tax Contribution:** \$[Amount] annually in local/state taxes
- **Vendor Spending:** \$[Amount] with [#] local suppliers
- **Community Support:** [Charitable contributions, sponsorships]

Industry Context

MARKET CONDITIONS

- Industry Growth Rate: [%] per [source]
- Regional Economic Factors: [Description]
- Competitive Landscape: [Position among competitors]
- Regulatory Environment: [Relevant factors]

BUSINESS DIFFERENTIATION

1. [Unique value proposition 1]
2. [Unique value proposition 2]
3. [Unique value proposition 3]

3. THE LOSS EVENT

Chronology of Events

PRE-LOSS STATUS

- Date/Time: [24 hours before loss]
- Operations: Normal at 100% capacity
- Revenue Run Rate: \$[Amount] daily
- Employees Present: [Number]
- Inventory Value: \$[Amount]

THE INCIDENT

| Time | Event | Impact | Documentation |
|--------|---------------------------|--------------------------|------------------------------|
| [Time] | Initial incident occurs | [Description] | Police/Fire Report #[Number] |
| [Time] | Emergency services arrive | [Response description] | Incident Report attached |
| [Time] | Evacuation ordered | All operations cease | Official order attached |
| [Time] | Initial damage assessment | [Findings] | Photos/video attached |
| [Time] | Insurance notified | Claim #[Number] assigned | Confirmation attached |

IMMEDIATE AFTERMATH (First 48 hours)

- **Safety Measures:** [Actions taken to secure property]

- **Mitigation Steps:** [Emergency repairs, water extraction, etc.]
- **Business Continuity:** [Attempts to maintain operations]
- **Stakeholder Communication:** [Employees, customers, vendors notified]

Physical Damage Assessment

PRIMARY DAMAGE

| Area/Asset | Damage Description | Replacement Value | Repair Cost |
|----------------------|--------------------|-------------------|-------------------|
| Building Structure | [Specific damage] | [\$Amount] | [\$Amount] |
| Production Equipment | [Specific damage] | [\$Amount] | [\$Amount] |
| Inventory | [Specific damage] | [\$Amount] | N/A - Total loss |
| Computer Systems | [Specific damage] | [\$Amount] | [\$Amount] |
| Records/Data | [Specific damage] | Invaluable | [\$Recovery cost] |

SECONDARY DAMAGE

- Smoke/Water damage to: [Description]
- Contamination of: [Description]
- Code-required upgrades: [List]

TOTAL PHYSICAL DAMAGE: \$[Amount]

4. COVERAGE ANALYSIS

Policy Provisions Applicable to This Loss

BUSINESS INCOME COVERAGE

- **Policy Language:** "[Quote relevant policy language]"
- **Limit:** \$[Amount] or [Months] of actual loss sustained
- **Waiting Period/Deductible:** [Hours/Days] or \$[Amount]
- **Coverage Trigger:** ✓ Physical damage to insured property
- **Coverage Period:** Until property is repaired/replaced with reasonable speed

EXTRA EXPENSE COVERAGE

- **Policy Language:** "[Quote relevant provision]"
- **Limit:** \$[Amount] or [%] of BI limit

- **Covered Expenses:** All reasonable expenses to minimize loss
- **Documentation Required:** ✓ Invoices and proof of payment

ADDITIONAL COVERAGES TRIGGERED

| Coverage | Limit | Trigger Event | Applicable? |
|----------------------------|-------------------|------------------------|--|
| Civil Authority | [\$Amount]/[Days] | Government order | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Extended Business Income | [Days] | After repairs complete | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Ingress/Egress | [\$Amount] | Access prevented | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Contingent Business Income | [\$Amount] | Supplier/customer loss | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Service Interruption | [\$Amount] | Utility failure | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Coverage Confirmation

NO EXCLUSIONS APPLY We have reviewed all policy exclusions and confirm:

- ✓ No applicable exclusions to this loss
- ✓ All conditions precedent satisfied
- ✓ All duties after loss fulfilled
- ✓ Timely notice provided
- ✓ Full cooperation maintained

5. BUSINESS INCOME LOSS CALCULATION

Methodology Statement

CALCULATION APPROACH Our business income loss calculation follows the generally accepted "But For" methodology, comparing:

1. What revenue WOULD have been earned "but for" the loss
2. What revenue WAS actually earned during the interruption
3. Plus unavoidable continuing expenses

This approach is:

- ✓ Consistent with policy terms
- ✓ Accepted by courts nationwide
- ✓ Verified by forensic accounting

- ✓ Supported by historical data

Revenue Projections

HISTORICAL BASELINE (Same period, prior years)

| Period | 3 Years Ago | 2 Years Ago | Last Year | Average | Growth Trend |
|---------------|-------------|-------------|------------|------------|--------------|
| Month 1 | [\$Amount] | [\$Amount] | [\$Amount] | [\$Amount] | [%] |
| Month 2 | [\$Amount] | [\$Amount] | [\$Amount] | [\$Amount] | [%] |
| Month 3 | [\$Amount] | [\$Amount] | [\$Amount] | [\$Amount] | [%] |
| Quarter Total | [\$Amount] | [\$Amount] | [\$Amount] | [\$Amount] | [%] |

ADJUSTMENTS TO BASELINE

| Adjustment Factor | Impact | Justification | Documentation |
|---------------------|--------------|------------------------|--------------------|
| Proven Growth Trend | + [%] | Historical CAGR of [%] | Tax returns |
| Contracted Sales | + \$[Amount] | Signed contracts | Contracts attached |
| Seasonal Factors | +/- [%] | Historical patterns | Sales records |
| Market Expansion | + \$[Amount] | New territory/products | Business plan |
| Economic Factors | +/- [%] | GDP/industry growth | Economic reports |
| Net Adjustment | + [%] | | |

"BUT FOR" REVENUE CALCULATION

| Month | Historical Base | Adjustments | Projected Revenue |
|-----------|-----------------|-------------|-------------------|
| [Month 1] | [\$Amount] | + [%] | [\$Amount] |
| [Month 2] | [\$Amount] | + [%] | [\$Amount] |
| [Month 3] | [\$Amount] | + [%] | [\$Amount] |
| [Month 4] | [\$Amount] | + [%] | [\$Amount] |
| [Month 5] | [\$Amount] | + [%] | [\$Amount] |
| [Month 6] | [\$Amount] | + [%] | [\$Amount] |
| TOTAL | [\$Amount] | | [\$Amount] |

Actual Revenue During Interruption

MITIGATION REVENUE ACHIEVED

| Source | Month 1 | Month 2 | Month 3 | Total |
|---------------------|------------|------------|------------|------------|
| Temporary Location | [\$Amount] | [\$Amount] | [\$Amount] | [\$Amount] |
| Remote/Online Sales | [\$Amount] | [\$Amount] | [\$Amount] | [\$Amount] |
| Fulfilled Backlog | [\$Amount] | [\$Amount] | [\$Amount] | [\$Amount] |
| Other | [\$Amount] | [\$Amount] | [\$Amount] | [\$Amount] |
| Total Actual | [\$Amount] | [\$Amount] | [\$Amount] | [\$Amount] |

Lost Business Income Summary

| Component | Amount |
|---------------------------------|-------------|
| Projected "But For" Revenue | [\$Amount] |
| Less: Actual Revenue Achieved | -\$[Amount] |
| Gross Lost Revenue | [\$Amount] |
| Plus: Continuing Fixed Expenses | +\$[Amount] |
| Less: Avoided Variable Expenses | -\$[Amount] |
| Net Business Income Loss | [\$Amount] |

6. EXTRA EXPENSE DOCUMENTATION

Overview of Extra Expenses

PURPOSE AND BENEFIT All extra expenses were incurred to:

- 1. Minimize the business income loss
- 2. Continue critical operations
- 3. Maintain customer relationships
- 4. Expedite the recovery process

COST-BENEFIT ANALYSIS

- Total Extra Expenses: \$[Amount]
- Business Income Preserved: \$[Amount]
- Net Benefit to Insurer: \$[Amount] reduction in BI claim

Detailed Extra Expense Categories

TEMPORARY OPERATIONS

| Expense | Vendor | Amount | Benefit | Documentation |
|-------------------------|----------|------------|----------------------------|-------------------|
| Temporary Location Rent | [Vendor] | [\$Amount] | Maintained [%] operations | Lease attached |
| Moving/Setup Costs | [Vendor] | [\$Amount] | Enabled quick restart | Invoices attached |
| Additional Insurance | [Vendor] | [\$Amount] | Required for temp location | Policy attached |
| Security | [Vendor] | [\$Amount] | Protected assets | Invoices attached |
| Utilities Setup | [Vendor] | [\$Amount] | Enabled operations | Bills attached |
| Subtotal | | [\$Amount] | | |

EQUIPMENT & TECHNOLOGY

| Expense | Vendor | Amount | Benefit | Documentation |
|----------------------|----------|------------|----------------------------|--------------------|
| Equipment Rental | [Vendor] | [\$Amount] | Replaced damaged units | Rental agreements |
| Expedited Shipping | [Vendor] | [\$Amount] | Reduced downtime by [days] | Shipping receipts |
| Emergency IT Systems | [Vendor] | [\$Amount] | Maintained data access | Invoices attached |
| Software Licenses | [Vendor] | [\$Amount] | Continued operations | License agreements |
| Subtotal | | [\$Amount] | | |

LABOR & STAFFING

| Expense | Period | Amount | Benefit | Documentation |
|-------------------|---------|------------|---------------------------|-----------------------|
| Overtime Premium | [Dates] | [\$Amount] | Caught up on backlog | Payroll records |
| Temporary Staff | [Dates] | [\$Amount] | Maintained service levels | Staffing invoices |
| Retention Bonuses | [Date] | [\$Amount] | Prevented staff loss | Payroll documentation |
| Training Costs | [Dates] | [\$Amount] | Cross-trained staff | Training records |
| Subtotal | | [\$Amount] | | |

CUSTOMER RETENTION

| Expense | Purpose | Amount | Result | Documentation |
|----------------------|-------------------------|------------|------------------------|------------------|
| Advertising Campaign | Notify of temp location | [\$Amount] | [%] customer retention | Ad invoices |
| Direct Mail | Customer communication | [\$Amount] | [#] customers reached | Mailing receipts |
| Discounts Given | Retention incentive | [\$Amount] | [%] customers retained | Sales records |
| Customer Events | Relationship building | [\$Amount] | [#] attended | Event invoices |
| Subtotal | | [\$Amount] | | |

PROFESSIONAL SERVICES

| Service | Provider | Amount | Purpose | Documentation |
|---------------------|----------|------------|---------------------|-------------------|
| Forensic Accounting | [Firm] | [\$Amount] | Claim documentation | Engagement letter |
| Public Adjuster | [Name] | [\$Amount] | Claim management | Contract attached |
| Legal Counsel | [Firm] | [\$Amount] | Coverage advice | Invoices attached |
| Engineering Reports | [Firm] | [\$Amount] | Damage assessment | Reports attached |
| Subtotal | | \$[Amount] | | |

TOTAL EXTRA EXPENSES: \$[Amount]

7. MITIGATION EFFORTS

Comprehensive Mitigation Strategy

IMMEDIATE ACTIONS (First 72 Hours)

| Action | Cost | Result | Savings to Insurer |
|-----------------------|------------|----------------------------|--------------------|
| Emergency board-up | [\$Amount] | Prevented further damage | [\$Amount] |
| Water extraction | [\$Amount] | Prevented mold | [\$Amount] |
| Inventory removal | [\$Amount] | Saved [%] of inventory | [\$Amount] |
| Data recovery | [\$Amount] | Preserved customer records | Invaluable |
| Customer notification | [\$Amount] | Retained [%] of base | [\$Amount] |

OPERATIONAL MITIGATION (Ongoing)

| Strategy | Implementation | Cost | Revenue Preserved |
|---------------------|----------------|------------|-------------------------|
| Temporary location | Within [days] | [\$Amount] | [\$Amount] monthly |
| Remote work setup | Immediate | [\$Amount] | [\$Amount] productivity |
| Supplier agreements | Renegotiated | [\$Amount] | [\$Amount] saved |
| Partial operations | [Description] | [\$Amount] | [\$Amount] revenue |

MITIGATION SUCCESS METRICS

- Revenue preserved: [%] of normal
- Customers retained: [%]
- Employees retained: [%]
- Market share maintained: [%]

- Recovery time reduced by: [Days/Months]

Options Not Taken and Rationale

| Option Considered | Why Not Implemented | Would Have Cost |
|----------------------------|---------------------------|-----------------|
| Full temporary facility | Too expensive vs. benefit | \${Amount} |
| Outsourcing all production | Quality concerns | \${Amount} |
| Immediate full replacement | Lead time too long | \${Amount} |

8. PERIOD OF RESTORATION

Timeline Analysis

THEORETICAL VS. ACTUAL

| Milestone | Theoretical Date | Actual/Expected | Delay | Reason for Delay |
|-------------------------|------------------|-----------------|--------|-------------------------|
| Loss occurred | [Date] | [Date] | 0 days | N/A |
| Claim reported | +1 day | [Date] | [Days] | [If any] |
| Adjuster inspection | +3 days | [Date] | [Days] | [Adjuster availability] |
| Scope agreement | +10 days | [Date] | [Days] | [Negotiation required] |
| Permits obtained | +20 days | [Date] | [Days] | [City backlog] |
| Contractor mobilized | +25 days | [Date] | [Days] | [Material availability] |
| Demolition complete | +35 days | [Date] | [Days] | [Scope expansion] |
| Reconstruction complete | +120 days | [Date] | [Days] | [Various factors] |
| Operations resume | +130 days | [Date] | [Days] | [Final inspections] |
| Total Period | 130 days | [Actual] | [Days] | |

Factors Affecting Restoration

DELAYS BEYOND OUR CONTROL

1. **Permitting:** [#] days - Municipality backlog
2. **Materials:** [#] days - Supply chain issues
3. **Weather:** [#] days - Work stoppages
4. **Inspections:** [#] days - Inspector availability
5. **Code Changes:** [#] days - Unexpected requirements

ACCELERATION EFFORTS

- Paid expediting fees: \$[Amount]
- Multiple contractor crews: \$[Amount] additional
- Overtime authorized: \$[Amount]
- Air freight materials: \$[Amount]

9. EXTENDED PERIOD & CIVIL AUTHORITY

Extended Business Income Period

RAMP-UP ANALYSIS

| Week After Reopening | Normal Revenue | Actual Revenue | Shortfall | Recovery % |
|-----------------------|----------------|----------------|------------|------------|
| Week 1 | \$(Amount) | \$(Amount) | \$(Amount) | [%] |
| Week 2 | \$(Amount) | \$(Amount) | \$(Amount) | [%] |
| Week 3 | \$(Amount) | \$(Amount) | \$(Amount) | [%] |
| Week 4 | \$(Amount) | \$(Amount) | \$(Amount) | [%] |
| Weeks 5-8 | \$(Amount) | \$(Amount) | \$(Amount) | [%] |
| Total Extended Period | \$(Amount) | \$(Amount) | \$(Amount) | |

FACTORS DELAYING FULL RECOVERY

- Customer reacquisition time
- Inventory rebuilding
- Staff rehiring and training
- Market share recapture
- Reputation rebuilding

Civil Authority Coverage (If Applicable)

ORDER DETAILS

- Issuing Authority: [Government entity]
- Order Date/Time: [Date/Time]
- Area Affected: [Geographic description]
- Duration: [Start] to [End]

- Our Distance from Affected Area: [Distance]

COVERAGE APPLICATION

- Policy Limit: [Days] or \$[Amount]
- Waiting Period: [Hours]
- Coverage Triggered: [Date]
- Coverage Ends: [Date]
- Daily Loss: \$[Amount]
- **Total Civil Authority Claim: \$[Amount]**

10. FINANCIAL IMPACT ANALYSIS

Cash Flow Impact

MONTHLY CASH REQUIREMENTS

| Obligation | Normal | During Loss | Shortfall | Consequence if Unpaid |
|---------------|------------|-------------|------------|-----------------------|
| Payroll | [\$Amount] | [\$Amount] | [\$Amount] | Staff loss |
| Rent/Lease | [\$Amount] | [\$Amount] | [\$Amount] | Eviction |
| Loan Payments | [\$Amount] | [\$Amount] | [\$Amount] | Default |
| Insurance | [\$Amount] | [\$Amount] | [\$Amount] | Coverage lapse |
| Utilities | [\$Amount] | [\$Amount] | [\$Amount] | Service cutoff |
| Taxes | [\$Amount] | [\$Amount] | [\$Amount] | Penalties |
| Total Monthly | [\$Amount] | [\$Amount] | [\$Amount] | |

CUMULATIVE IMPACT

| Month | Cash Need | Cash Available | Gap | Cumulative Gap |
|---------|------------|----------------|------------|----------------|
| Month 1 | [\$Amount] | [\$Amount] | [\$Amount] | [\$Amount] |
| Month 2 | [\$Amount] | [\$Amount] | [\$Amount] | [\$Amount] |
| Month 3 | [\$Amount] | [\$Amount] | [\$Amount] | [\$Amount] |

Long-Term Business Impact

QUANTIFIABLE DAMAGES

| Impact Category | Immediate Loss | Long-term Loss | Total Impact |
|-----------------|----------------|---------------------|--------------|
| Lost Customers | [#] | [#] additional | [#] total |
| Lost Contracts | [\$[Amount]] | [\$[Amount]] future | [\$[Amount]] |
| Market Share | [%] decline | [%] additional | [%] total |
| Credit Impact | [Points] | [Future cost] | [\$[Amount]] |
| Reputation | [Metric] | [Recovery cost] | [\$[Amount]] |

COMPETITIVE DISADVANTAGE While we've been closed:

- Competitor A gained [%] market share
- Competitor B captured [#] of our customers
- New entrant C established presence

Recovery will require significant investment beyond insurance proceeds.

11. CLAIM SUMMARY & REQUEST

Final Claim Calculation

| Coverage Component | Calculated Loss | Policy Limit | Claimed Amount |
|--------------------|---------------------|---------------------|---------------------|
| Business Income | [\$[Amount]] | [\$[Amount]] | [\$[Lower of two]] |
| Extra Expense | [\$[Amount]] | [\$[Amount]] | [\$[Lower of two]] |
| Civil Authority | [\$[Amount]] | [\$[Amount]] | [\$[Lower of two]] |
| Extended Period | [\$[Amount]] | [\$[Amount]] | [\$[Lower of two]] |
| Gross Claim | [\$[Amount]] | [\$[Amount]] | [\$[Amount]] |
| Less: Deductible | | | -\$[Amount] |
| NET CLAIM | | | [\$[Amount]] |

Payment Request Structure

IMMEDIATE ADVANCE NEEDED

- Amount: \$[Amount] (representing [%] of undisputed amount)
- Purpose: Critical operations and obligations
- Timeline: Within [#] business days
- Impact if Delayed: [Specific consequences]

SUBSEQUENT PAYMENTS

| Payment | Amount | Timing | Purpose |
|---------|------------|--------|------------------|
| Second | [\$Amount] | [Date] | [Specific needs] |
| Third | [\$Amount] | [Date] | [Specific needs] |
| Final | [\$Amount] | [Date] | [Completion] |

Requested Actions

1. **ACKNOWLEDGE** receipt of this claim within 24 hours
2. **CONFIRM** coverage within 5 business days
3. **ISSUE** advance payment of \$[Amount] within 10 business days
4. **SCHEDULE** settlement conference within 15 business days
5. **COMPLETE** full settlement within 30 business days

Cooperation Statement

We remain fully available for:

- ✓ Examination under oath
- ✓ Additional documentation requests
- ✓ Site inspections
- ✓ Settlement negotiations
- ✓ Expedited resolution process

Contact for immediate response:

- Primary: [Name] at [Phone] or [Email]
- Secondary: [Name] at [Phone] or [Email]
- Available: [Hours/Days]

12. APPENDICES

Appendix A: Financial Documentation

1. **Tax Returns** (3 years)
 - Federal returns with all schedules
 - State returns

- Sales tax returns

2. **Financial Statements** (24 months)

- Profit & Loss statements
- Balance sheets
- Cash flow statements
- General ledger detail

3. **Sales Documentation**

- Daily sales reports
- Monthly summaries
- Major customer contracts
- Lost order documentation

Appendix B: Loss Documentation

1. **Official Reports**

- Fire/Police reports
- Building inspector reports
- Health department orders
- OSHA citations (if any)

2. **Damage Documentation**

- Professional photos (dated/labeled)
- Video walkthrough
- Engineering reports
- Restoration estimates

Appendix C: Professional Analysis

1. **Forensic Accounting Report**

- CPA certification
- Detailed calculations
- Industry analysis
- Market impact study

2. **Economic Analysis**

- Regional economic data

- Industry trends
- Competitor analysis
- Market share documentation

Appendix D: Mitigation Documentation

1. Temporary Operations

- Lease agreements
- Equipment rentals
- Utility accounts
- Permits obtained

2. Emergency Expenses

- All invoices
- Payment proofs
- Benefit analysis
- Decision documentation

Appendix E: Correspondence Log

- All emails with adjuster
 - Phone call summaries
 - Meeting notes
 - Document submissions
-

CONCLUSION

This claim represents not just numbers on a spreadsheet, but the survival of a business that employs [#] people, serves [#] customers, and contributes \$[Amount] annually to the local economy.

We have:

- ✓ Acted with complete transparency
- ✓ Provided comprehensive documentation
- ✓ Mitigated damages aggressively
- ✓ Cooperated fully with the investigation
- ✓ Calculated losses conservatively

We now look to [Insurance Company] to fulfill its obligations under the policy, enabling us to recover, rebuild, and continue serving our community.

Time is of the essence. Every day of delay increases the risk of permanent business failure and expanded economic damage.

We appreciate your prompt attention to this matter and look forward to a fair and expeditious resolution.

Respectfully submitted,

[Name]

[Title]

[Business Name]

[Date]

Professional Representatives:

[Forensic Accountant Name]

[Credentials]

[Firm]

[Public Adjuster Name]

[License #]

[Firm]

[Attorney Name] (if applicable)

[Bar #]

[Firm]

CERTIFICATION

I hereby certify under penalty of perjury that:

1. All information provided is true and accurate
2. All calculations are based on actual business records
3. No material facts have been concealed or misrepresented

4. All supporting documentation is authentic

[Name], [Title]

Date: [Date]

State of [State]

County of [County]

Subscribed and sworn before me this [Day] day of [Month], [Year]

Notary Public

Commission Expires: [Date]

[Seal]

END OF PRESENTATION

This document contains [#] pages and [#] appendices totaling [#] pages of supporting documentation.