**{date}**

Ins. Co.: {carrier}

**Attention: Claims Department**

**CLAIM # {claim}**

**Insured: {insured}**

**Address: {address}**

**Policy Number: {policy\_number}**

**D.O.L.: {date\_of\_loss}**

**Damage due to: {loss\_cause}**

Dear Insurance Adjuster:

It has been over [ ] days since our last correspondence to your office. This letter will serve to confirm that your company has not responded and/or acknowledged our communication as required by Florida Statute §627.426. Florida Statute §627.426 states in relevant part:

**627.70131 Insurer's duty to acknowledge communications regarding claims;**

**Investigation-**

1. (1)(a) Upon an insurer's receiving a communication with respect to a claim, the insurer shall, within 14 calendar days, review and acknowledge receipt of such communication unless payment is made within that period of time or unless the failure to acknowledge is caused by factors beyond the control of the insurer which reasonably prevent such acknowledgment. If the acknowledgment is not in writing, a notification indicating acknowledgment shall be made in the insurer's claim file and dated. A communication made to or by an agent of an insurer with respect to a claim shall constitute communication to or by the insurer. Attached is a copy of our last letter to you for your reference.

Please contact our office immediately upon receipt of this correspondence. It is imperative that you contact my office to discuss the current status of this claim to insure that no further unnecessary delays occur in regards to the adjustment of this claim. If I do no hear from you in the next 14 days, I will assume the insurance company has completed its investigation and adjustment of the insured’s claim.

Thank you very much for your anticipated cooperation and prompt attention.

Sincerely,

Public Adjuster

Josh Solomon

Lisc. # W