**{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,

Enclosed please find the Insured’s executed Sworn Statement of Proof of Loss for your review.  This Proof of Loss does not include, Mitigation Services and/or any other services performed at this property. This Proof of Loss is based solely on our estimate and can be amended at any time. Please review it and contact me within 14 days to discuss this claim for a possible resolution.

Should we not hear from your office within the next 14 days, we will assume that {carrier} has completed its investigation and has all of the necessary information and documentation from the Insured to make an informed decision.

Furthermore, should we not hear from {carrier} within 30 days of receipt of this Sworn Statement of Proof of Loss, we will assume the Sworn Statement of Proof of Loss has been accepted and payment is forthcoming.

I look forward to working with you to resolve this matter for the benefit of the insured.

Sincerely,

Josh Solomon P.A.,

Lisc. # W

Office (305)417-9770