<< Date.Verbose >>

**VIA FACSIMILE: << Matter.Relationships.DefendantLiabilityAdjuster.PrimaryFaxNumber.Number >>**

<< Matter.CustomField.DefendantsInsuranceName >>

Claims Department

<< Matter.Relationships.DefendantLiabilityAdjuster.Address >>

|  |  |  |
| --- | --- | --- |
| **RE:** | **Our Client:** | **<< Matter.Client.Name >>** |
|  | **Your Insured:** | **<< Matter.Relationships.Defendant.Name >>** |
|  | **Claim No:** | **<< Matter.CustomField.DefendantsInsuranceClaimNo >>** |
|  | **Date of Incident:** | **<< Matter.CustomField.DateOfIncident >>** |

Dear << Matter.Relationships.DefendantLiabilityAdjuster.Prefix >> << Matter.Relationships.DefendantLiabilityAdjuster.LastName >>,

Please be advised that our firm, **Ledyard Law, LLC**, represents << Matter.Client.Name >> regarding injuries sustained in an automobile collision that occurred on << Matter.CustomField.DateOfIncident >>. Based on the information available, we believe the accident was caused by the negligence of your insured, << Matter.Relationships.Defendant.Name >>.

We request that you direct all future correspondence related to this matter to our office. Additionally, please provide the following:

- A copy of the declarations page and applicable policy

- Any incident or investigation reports related to the claim

- Copies of recorded statements or photographs, if available

Once our client has completed treatment and been discharged, we will submit a comprehensive demand package under separate cover. In the meantime, please confirm receipt of this letter and our representation.

If you have any questions, you may contact our office at your convenience.

Thank you for your attention to this matter.

Sincerely,

Icon

Description automatically generated

David C.M. Ledyard

DL/<< Matter.CustomField.UserInitials >>