

[Your Name]
[Your Address]
[City, State, Zip Code]
[Your Phone Number]
[Your Email]

[Date]

[Adjuster Name]
[Insurance Company Name]
[Address]
[City, State, Zip Code]

RE: Notice of Intent to Pursue Extracontractual Damages and Bad Faith Claim

Claim Number: [Claim Number]

Policy Number: [Policy Number]

Insured: [Your Name / Name of Insured]

Date of Loss: [Date]

Dear [Adjuster Name],

This letter serves as formal notice that [Insurance Company Name] is acting in bad faith regarding the handling of the aforementioned claim. Your conduct to date constitutes a breach of the implied covenant of good faith and fair dealing inherent in our insurance contract.

Specifically, your company has engaged in the following bad faith practices:

- [Insert specific detail: e.g., Unreasonable delay in investigating the claim]
- [Insert specific detail: e.g., Failure to provide a prompt and reasonable explanation for the denial of benefits]
- [Insert specific detail: e.g., Offering an amount significantly lower than the undisputed value of the loss]
- [Insert specific detail: e.g., Failure to acknowledge and reply to communications within state-mandated timelines]

Due to these actions, I am entitled to extracontractual damages above and beyond the original policy limits. These damages include, but are not limited to, compensation for [emotional distress, attorney fees, interest, and consequential economic losses] resulting directly from your failure to settle this claim fairly.

Formal Demand:

I hereby demand payment of the full policy benefits in the amount of \$[Amount], plus extracontractual damages in the amount of \$[Amount], for a total settlement of \$[Total Amount].

Failure to resolve this matter within [Number, e.g., 10 or 14] business days will result in the filing of a formal complaint with the [State Name] Department of Insurance and the commencement of legal action to recover all damages allowed under state law, including punitive damages where applicable.

Please govern yourselves accordingly.

Sincerely,

[Your Signature]

[Your Printed Name]