

Date: [Insert Date]

RE: FINAL SETTLEMENT AND RELEASE OF ALL CLAIMS

Claimant: [Insert Name of Claimant]

Insured/Respondent: [Insert Name of Respondent]

Claim Number: [Insert Claim Number]

Date of Incident: [Insert Date of Incident]

To [Insert Name of Claimant/Legal Representative],

This letter confirms the final agreement reached regarding the above-referenced liability claim. Upon receipt of the settlement payment, this document serves as a full and final discharge of liability.

1. Settlement Amount: The total sum of \$[Insert Amount] (the "Settlement Sum") shall be paid to the Claimant in full and final satisfaction of all claims arising from the incident.

2. Release of Liability: In consideration of the Settlement Sum, the Claimant hereby releases, acquits, and forever discharges [Insert Name of Respondent/Insurer] and all related parties from any and all past, present, or future actions, causes of action, claims, and demands, whether known or unknown, resulting from the incident mentioned above.

3. No Admission of Fault: It is understood that this settlement is a compromise of a disputed claim and that the payment made is not to be construed as an admission of liability on the part of the Respondent.

4. Confidentiality: The parties agree to keep the terms and conditions of this settlement strictly confidential, except as required by law.

5. Finality: This agreement constitutes the entire agreement between the parties and supersedes any prior oral or written understandings.

Please acknowledge your acceptance of these terms by signing below.

Sincerely,

[Your Name/Signature]

[Your Title/Company Name]

CLAIMANT ACCEPTANCE:

I, [Insert Claimant Name], hereby accept the terms of this settlement and release all claims as stated above.

Signature: _____ Date: _____