

**Date:** [Current Date]

**To:**

[Recipient Name]

[Recipient Address]

[City, State, Zip Code]

**RE: Notice of Investigation**

**Claim Number:** [Claim Number]

**Date of Loss:** [Date of Accident]

**Policy Number:** [Policy Number]

**Our Insured:** [Insured Name]

Dear [Recipient Name],

This letter is to inform you that [Insurance Company Name] has initiated a formal investigation regarding the automobile collision that occurred on [Date of Accident] at [Location of Accident].

Our goal is to complete a thorough review of the facts surrounding this incident. This investigation will include, but is not limited to:

- Reviewing the official police report;
- Collecting statements from all involved parties and witnesses;
- Inspecting vehicle damages and scene photos;
- Evaluating applicable policy coverage.

Please be advised that this letter is a notice of investigation only and does not constitute an admission of liability or a guarantee of payment. We are currently operating under a reservation of rights while we determine the facts of the loss.

To assist us in a timely resolution, please provide any documentation, photographs, or witness information you may have regarding this event. If you have already retained legal counsel, please forward this letter to your attorney.

If you have any questions, please contact me directly at [Phone Number] or via email at [Email Address].

Sincerely,

[Adjuster Name]

[Title]

[Insurance Company Name]