

[Date]

[Claimant Name]

[Claimant Address]

[City, State, Zip Code]

**Re: Notice of General Liability Claim Investigation**

Claim Number: [Insert Claim Number]

Date of Incident: [Insert Date of Loss]

Policyholder: [Insert Name of Insured]

Dear [Claimant Name],

This letter is to acknowledge receipt of your claim regarding the incident that occurred on [Date of Incident] at [Location]. We have been assigned to investigate this matter on behalf of [Company Name/Insurer].

We are currently in the initial stages of our investigation. The purpose of this process is to determine the facts surrounding the incident and to evaluate any potential liability. This investigation may include, but is not limited to, the following:

- Reviewing incident reports and police records.
- Interviewing witnesses and involved parties.
- Conducting a site inspection or reviewing photographic evidence.
- Gathering and reviewing medical or property damage documentation.

To assist us in this process, please provide any documentation you currently have in your possession, such as repair estimates, medical bills, or photos of the scene. You may send these documents to [Email Address] or the mailing address listed above.

Please be advised that the initiation of this investigation does not constitute an admission of liability or a guarantee of payment. We will notify you in writing once a formal determination has been made.

If you have any questions or additional information, please contact me directly at [Phone Number].

Sincerely,

[Your Name]

[Your Title]

[Your Company Name]