**URGENT: EXPEDITED INSPECTION NOTICE**

Date: [Insert Date]

Claim Number: [Insert Claim Number]
Policy Number: [Insert Policy Number]
Property Address: [Insert Property Address]

Dear [Policyholder Name],

Regarding your recent property claim, we have assigned an independent field adjuster to perform an expedited inspection of the reported damages. Due to the nature of this claim, we are prioritizing this site visit to accelerate your recovery process.

**Your Appointment Details:**

- **Field Adjuster:** [Adjuster Name]
- **Phone Number:** [Adjuster Phone Number]
- **Date of Inspection:** [Date]
- **Estimated Arrival Time:** [Time Window]

**What to Expect:**

The adjuster will require access to all affected areas of the property. The inspection will involve taking measurements, capturing photographs, and documenting the cause of loss. Please ensure that an adult (18 years or older) is present to provide access to the premises.

**Required Documentation:**

To assist with the expedited processing, please have the following items ready if available:

- Repair estimates or contractor bids
- Inventory lists of damaged personal property
- Photos or videos taken immediately after the loss
- Receipts for emergency repairs or temporary housing

If you need to reschedule this appointment, please contact the adjuster directly or our claims department at [Company Phone Number] immediately. Please note that rescheduling may delay the processing of your claim.

Thank you for your cooperation.

Sincerely,

[Sender Name]

[Company Name]
[Contact Information]