

[Date]

[Insured Name]

[Insured Address]

[City, State, Zip Code]

**Re: Notice of Vehicle Total Loss and Salvage Value**

Claim Number: [Claim Number]

Policy Number: [Policy Number]

Vehicle Year/Make/Model: [Year/Make/Model]

Vehicle Identification Number (VIN): [VIN Number]

Dear [Insured Name],

Following a recent inspection and appraisal of your vehicle involved in the loss occurring on [Date of Loss], we have determined that the cost of repairs exceeds the vehicle's Actual Cash Value. Therefore, we are declaring your vehicle a total loss.

Based on our evaluation, the settlement figures are as follows:

- **Actual Cash Value (ACV):** \$[Amount]
- **Applicable Sales Tax:** \$[Amount]
- **Title/Registration Fees:** \$[Amount]
- **Deductible:** - \$[Amount]
- **Gross Settlement Amount:** \$[Amount]

**Salvage Option:**

If you choose to retain the vehicle, the salvage value will be deducted from your settlement. The salvage value for your vehicle has been determined to be: **\$[Salvage Amount]**.

If you retain the vehicle, the net settlement paid to you will be: **\$[Net Amount]**. Please be advised that retaining a salvage vehicle may require a "Salvage Title" and a safety inspection before it can be legally driven or insured again.

To proceed with this claim, please provide the following:

1. The original Certificate of Title (signed over to the insurance company if not retaining salvage).
2. All sets of keys for the vehicle.
3. The vehicle's current mileage: [Current Odometer Reading].

Please contact your claims adjuster at [Phone Number] or [Email Address] by [Deadline Date] to confirm whether you wish to release the vehicle to us or retain it as salvage.

Sincerely,

[Adjuster Name]

[Insurance Company Name]