

Date: [Insert Date]

Claim Number: [Insert Claim Number]

Policy Number: [Insert Policy Number]

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

VIN: [Insert VIN]

Dear [Insert Owner Name],

Regarding your insurance claim for the vehicle listed above, we have determined that the cost to repair the vehicle exceeds its Actual Cash Value (ACV). Therefore, the vehicle is considered a total loss.

As requested, you have elected to retain ownership of the salvage. The settlement breakdown is as follows:

- **Actual Cash Value of Vehicle:** \$[Insert Amount]
- **Applicable Sales Tax:** \$[Insert Amount]
- **Title/Registration Fees:** \$[Insert Amount]
- **Less Deductible:** - \$[Insert Amount]
- **Less Salvage Buyback Value:** - \$[Insert Amount]
- **Total Settlement Amount:** \$[Insert Total]

By retaining the salvage, you acknowledge the following:

1. The vehicle will be issued a "Salvage" or "Branded" title in accordance with state laws.
2. You are responsible for moving the vehicle from its current location to your chosen storage site.
3. Future insurance coverage for this vehicle may be limited or restricted.
4. The vehicle must pass a safety inspection if you intend to register it for road use in the future.

Please sign and return the enclosed documents, including the title (if required), to complete the processing of your payment.

Sincerely,

[Insert Adjuster Name]

[Insert Insurance Company Name]

[Insert Phone Number]