

[Date]

[Claimant/Insured Name]

[Address Line 1]

[Address Line 2]

RE: Notice of Partial Denial of Claim

Claim Number: [Claim Number]

Policy Number: [Policy Number]

Date of Loss: [Date of Loss]

Subject Property/Incident: [Description]

Dear [Name],

We have completed our investigation into the claim referenced above. This letter serves to inform you of our coverage determination regarding the damages reported.

### **Coverage Summary**

Based on the terms and conditions of General Liability Policy [Policy Number], we have determined that coverage applies to a portion of your claim. Specifically, the following damages are covered: [List covered items].

### **Partial Denial of Coverage**

However, we must respectfully deny coverage for the following specific damages: [List excluded damages].

Our decision is based on the following policy provisions and exclusions:

*[Insert Verbatim Policy Language - Example: Section II, Exclusion (j) Damage to Property]*

Under these provisions, the policy does not provide coverage for [Explain how the exclusion applies to the specific facts of the loss]. Because these specific damages fall under the aforementioned exclusion(s), we are unable to provide indemnification or reimbursement for this portion of the claim.

### **Payment Information**

A payment in the amount of \$[Amount] is being processed for the covered portion of your claim, less any applicable deductible. You should receive this payment under separate cover within [Number] business days.

### **Right to Appeal**

If you have additional information or documentation that you believe would change this determination, please submit it to our office for further review. You may also have the right to contact the [State] Department of Insurance if you disagree with this decision.

We reserve all rights and defenses under the policy and applicable law. No action taken by us shall be deemed a waiver of any of the terms or conditions of the policy.

Sincerely,

[Adjuster Name]

[Title]

[Insurance Company Name]