

[Your Name/Company Name]

[Your Address]

[City, State, Zip Code]

[Phone Number]

[Email Address]

[Date]

[Recipient Name/Insurance Company]

[Recipient Address]

[City, State, Zip Code]

Re: Notice of Claim for Contribution / Indemnity

Claimant: [Name of Original Injured Party]

Date of Incident: [Date]

Location: [Location of Incident]

Our Claim/Reference Number: [Reference Number]

Dear [Recipient Name/Adjuster Name],

We are writing to formally notify you of a claim for contribution and/or indemnity regarding the above-referenced matter.

As a result of the incident occurring on [Date], [Name of Original Injured Party] sustained damages. Investigation into this matter indicates that your insured, [Name of Joint Tortfeasor], was negligent or otherwise legally responsible for the circumstances leading to these damages. Specifically, [briefly state the basis of their liability].

[Your Company/Insured Name] has [paid a settlement / been found liable for a judgment] in the amount of \$[Amount] to the claimant. Because your insured shares legal liability for this loss as a joint tortfeasor, we are entitled to recover a pro-rata share of the total payment made.

Based on our assessment of comparative fault, we demand reimbursement in the amount of \$[Requested Amount], which represents [Percentage]% of the total loss.

Please find enclosed the following supporting documentation:

- [Document 1: e.g., Police Report]
- [Document 2: e.g., Settlement Agreement/Release]
- [Document 3: e.g., Proof of Payment]

Please acknowledge receipt of this letter within [Number] days. We look forward to resolving this matter amicably. If we do not hear from you, we will be forced to consider further legal action to protect our interests.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Title]