

URGENT: FORMAL NOTICE OF INTENT TO LITIGATE

Date: [Date]

[Recipient Name/Insurance Company Name]

[Recipient Address]

[City, State, Zip Code]

RE: Notice of Subrogation Claim

- Our Insured: [Name of Your Insured]
- Claim Number: [Your Claim Number]
- Your Insured: [Name of Opposing Party]
- Your Policy/Claim Number: [Opposing Party Claim Number]
- Date of Loss: [Date of Incident]
- Total Amount Due: \$[Dollar Amount]

Dear [Contact Person Name or Claims Department],

This letter serves as formal notice that [Your Insurance Company Name] has completed its investigation and payments regarding the above-referenced loss. Our investigation has determined that your insured is liable for the damages sustained.

To date, we have paid the sum of \$[Dollar Amount] for damages resulting from this incident. Despite previous attempts to resolve this matter amicably, we have not received payment or a satisfactory settlement offer from your office.

Please be advised that if we do not receive payment in full or contact to establish a formal settlement agreement within [Number, e.g., 10 or 14] days from the date of this letter, we will refer this file to our legal counsel to initiate formal litigation against your insured. This may result in additional costs, including court fees and interest, for which your insured may be held responsible.

Please remit payment to the following address:

[Your Company Name]

[Payment Address]

[City, State, Zip Code]

If you have any questions regarding this final notice, please contact me directly at [Your Phone Number] or [Your Email Address].

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Title]

[Your Insurance Company Name]