[Date]

[Claimant Name]
[Claimant Address]
[City, State, Zip Code]

RE: Notice of Claim Closure

Claim Number: [Insert Claim Number]
Date of Incident: [Insert Date]
Subject: Closure due to Inactivity

Dear [Claimant Name],

We are writing to formally notify you that we have closed your claim file regarding the matter referenced above.

This decision has been made due to a lack of activity or response from your side. Our records indicate that our last communication was sent on [Date of Last Contact], and we have not received the requested information or documentation necessary to proceed with the evaluation of your claim.

As a result of this extended period of inactivity, we have moved this file to an inactive status and closed our records at this time.

Please be advised that this closure does not extend any applicable statutes of limitations or legal deadlines that may apply to your claim. If you wish to pursue this matter further, please contact us immediately to provide the outstanding information.

Should you have any questions, you may contact me at [Phone Number] or [Email Address].

Sincerely,

[Your Name]
[Your Title]
[Company Name]