[Date]
[Insured Name]
[Address]
[City, State, Zip Code]

Re: Notice of Administrative Closure
Claim Number: [Claim Number]
Policy Number: [Policy Number]
Date of Loss: [Date of Loss]

Dear [Insured Name],

We are writing to inform you that we have administratively closed the above-referenced insurance claim effective [Date].

Our records indicate that there has been no activity or communication regarding this file for more than [Number] days. Despite our previous attempts to contact you on [Date of last contact], we have not received the necessary documentation or information required to proceed with the evaluation of your claim.

Please be advised that this closure is administrative in nature and is not a formal denial of your claim. However, no further action will be taken by [Insurance Company Name] at this time.

If you wish to pursue this claim in the future, please contact us immediately. Please note that any future actions remain subject to the terms and conditions of your policy, as well as applicable statutes of limitations.

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

Sincerely,

[Adjuster Name]
[Title]
[Insurance Company Name]