[Date]

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

RE: Thirty-Day Notice of Intent to Close Claim

Claim Number: [Claim Number]
Date of Incident: [Date of Incident]

Dear [Recipient Name],

Our records indicate that there has been no activity or communication regarding the above-referenced claim for the past [Number] days. As a result, this claim is currently considered inactive.

Please be advised that this letter serves as formal notice that we intend to close this claim file in **thirty (30) days** from the date of this letter. Once the claim is closed, no further action will be taken on this file.

If you wish to keep this claim open, you must contact us before [Insert Date 30 Days from Now]. To proceed, please provide the following information:

- [Required Document or Action 1]
- [Required Document or Action 2]
- [Required Document or Action 3]

If we do not hear from you or receive the requested documentation by the deadline stated above, we will proceed with the administrative closure of your claim without further notice.

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

Sincerely,

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