

[Your Name]
[Your Address]
[City, State, Zip Code]
[Your Phone Number]
[Your Email Address]

[Date]

[Adjuster Name]
[Insurance Company Name]
[Claims Department Address]
[City, State, Zip Code]

RE: NOTICE OF STATUTORY BAD FAITH AND UNFAIR CLAIMS SETTLEMENT PRACTICES

Claim Number: [Insert Claim Number]

Policy Number: [Insert Policy Number]

Insured: [Insert Name of Insured]

Date of Loss: [Insert Date of Loss]

Dear [Adjuster Name or Claims Manager],

This letter serves as formal notice that [Insurance Company Name] is acting in bad faith regarding the handling of the above-referenced claim. Specifically, your company is in violation of [Insert State Statute, e.g., California Insurance Code § 790.03 or Florida Statute § 624.155] regarding Unfair Claims Settlement Practices.

The basis for this demand is rooted in the following actions or omissions by [Insurance Company Name]:

- [Reason 1: e.g., Failure to acknowledge and act reasonably promptly upon communications.]
- [Reason 2: e.g., Refusing to pay claims without conducting a reasonable investigation.]
- [Reason 3: e.g., Failing to attempt in good faith to effectuate a prompt, fair, and equitable settlement where liability has become reasonably clear.]
- [Reason 4: e.g., Compelling the insured to institute litigation to recover amounts due under an insurance policy.]

Factual Background:

[Provide a brief chronological summary of the claim, the evidence submitted, and how the insurance company has failed to meet its obligations.]

Demand:

In light of the clear liability and the damages documented, demand is hereby made for the immediate payment of the full policy limits/rightful claim amount of \$[Amount]. Furthermore, we demand [Insert any additional statutory interest or penalties applicable].

Failure to rectify these unfair practices and settle this claim within [Number of Days, e.g., 15 or 30] days of receipt of this letter will result in further legal action, including but not limited to the filing of a formal administrative complaint with the [State Name] Department of Insurance and the commencement of a bad faith lawsuit.

This letter is sent for the purpose of settlement and compromise and is without prejudice to any of the sender's rights or remedies at law or in equity.

Sincerely,

[Signature]

[Your Printed Name]