

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

[Date]

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

Re: Business Interruption Claim - Next Steps

Claim Number: [Insert Claim Number]

Date of Loss: [Insert Date]

Dear [Claimant Name],

We have received your initial notification regarding the business interruption claim for [Company Name]. We understand the challenges your business is currently facing and are committed to processing your claim efficiently.

To move forward with the evaluation of your claim, we require specific documentation to quantify the financial impact. Please provide the following items at your earliest convenience:

- **Financial Records:** Profit and Loss statements for the 12 months prior to the loss and for the period of interruption.
- **Tax Returns:** Federal and state income tax returns for the past two fiscal years.
- **Sales Records:** Monthly sales summaries and daily point-of-sale records for the period of interruption compared to the same period last year.
- **Payroll Information:** Payroll journals or reports detailing employee expenses during the period of closure or reduced operations.
- **Expense Logs:** Documentation of any extra expenses incurred to mitigate the loss or continue operations (e.g., temporary relocation, equipment rental).
- **Incident Reports:** Any police, fire, or internal reports related to the cause of the business interruption.

Once we receive these documents, a claims adjuster or forensic accountant may contact you to discuss the figures or schedule a site visit if necessary.

Please submit these documents via [Email Address/Online Portal] by [Insert Date]. If you have any questions or require an extension, please contact me directly at [Phone Number].

Thank you for your cooperation as we work to resolve this matter.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Title]