

[Date]

[Customer Name]

[Customer Address]

[City, State, Zip Code]

Subject: We value your feedback - Claim #[Claim Number]

Dear [Customer Name],

Recently, we completed the resolution of your property damage claim regarding [Brief Description of Property/Incident]. Our goal is to provide efficient and fair service, and we would like to hear about your experience.

Please take a moment to answer the following questions:

1. How satisfied were you with the speed of the initial inspection?

Very Satisfied Satisfied Neutral Unsatisfied

2. Was the communication from our claims adjuster clear and professional?

Yes No

3. How satisfied are you with the final resolution/settlement amount?

Very Satisfied Satisfied Neutral Unsatisfied

4. Overall, how would you rate your experience with our company?

Excellent Good Fair Poor

Additional Comments:

You may return this form in the provided envelope or complete the survey online at: [Link to Survey].

Thank you for choosing [Company Name].

Sincerely,

[Your Name]

[Your Title]

[Company Name]