

**SENT VIA CERTIFIED MAIL / RETURN RECEIPT REQUESTED**

Date: [Date]  
To: [Insurance Company Name]  
Attention: [Claims Adjuster Name / Legal Department]  
Address: [Insurance Company Address]  
City, State, Zip: [City, State, Zip]

**RE: NOTICE OF INTENT TO INITIATE BAD FAITH LITIGATION**

Claim Number: [Claim Number]  
Policy Number: [Policy Number]  
Insured Name: [Name of Insured]  
Date of Loss: [Date of Incident]

To Whom It May Concern:

This letter serves as formal notice that [Your Name/Client Name] intends to pursue litigation against [Insurance Company Name] for acting in bad faith regarding the handling of the above-referenced claim.

Our records indicate that [Insurance Company Name] has failed to uphold its contractual and legal obligations. Specifically, the grounds for this action include, but are not limited to:

- Unreasonable delay in the investigation and processing of the claim.
- Failure to provide a prompt and reasonable explanation for the denial of benefits.
- Failure to attempt in good faith to effectuate a prompt, fair, and equitable settlement.
- [Insert specific details regarding missed deadlines or misrepresented facts].

Despite providing all necessary documentation and cooperation, [Insurance Company Name] has continued to [deny/undervalue/stall] this claim without a reasonable basis. Such actions constitute a breach of the implied covenant of good faith and fair dealing.

**DEMAND FOR REMEDY**

We hereby demand that [Insurance Company Name] reconsider its position and settle this claim for the full amount of [Dollar Amount] within [Number, e.g., 14] days of receipt of this notice. Failure to resolve this matter within this timeframe will result in the immediate filing of a formal lawsuit seeking compensatory damages, punitive damages, and recovery of attorney fees and costs.

Please govern yourselves accordingly.

Sincerely,

[Your Signature]  
[Your Printed Name]

[Your Title/Role]  
[Phone Number]  
[Email Address]