## TIME LIMIT DEMAND FOR AMOUNTS CERTAIN

Today's Date:	3/2/2018	
		_
Vehicle Owner:	Full Name	
	Mailing Address	
		1
Insurance Company:	Name of Insurer (Geico for example)	
Claim Number:	Your claim Number (see repair estimate)	
Date of Loss:	Date of Accident	
Dear Mr./Ms.[adjuster's last nar	ne];	
With regards to the insurance claim referenced above, please accept this letter as our diminished value payout request.		
An answer, in writing, to this demand is hereby requested.		
As a direct and proximate result of your insured's negligence, we have incurred physical damage to our vehicle in the amount of [\$repair amount].		
Enclosed is a diminished value appraisal prepared by Tony Rached, a Diminished Value expert, it is self-explanatory.		
We demand to be fully indemnified for our vehicle's loss in value, and as such, please remit a payment of [\$DV amount] within 15 days of receipt of this notice. We also request reimbursement of our appraisal fee of [\$ the amount you paid the appraiser] as it is an additional indirect tort loss.		
We look forward to amicably resolving this matter.		
Respectfully,		
[Sender's name and Signature]		
Claimant		

All highlighted fields MUST be edited. Please delete this sentence before printing.