

# PERSONAL INJURY DEMAND LETTER

[Date of Letter]

[Recipient Name]

[Recipient Title]

[Recipient Company Name]

[Recipient Street Address]

[Recipient City, State, Zip Code]

**Subject: Demand for Settlement – Personal Injury Claim of [Claimant's full legal name] arising from incident on [Date of incident]**

Dear [Recipient Name or "Sir/Madam"],

This letter serves as a formal demand for settlement on behalf of our client, [Claimant's full legal name], for injuries and damages sustained as a direct result of the incident that occurred on [Date of incident] at approximately [Time of incident] at [Location of incident]. This incident was caused by the negligence of [At-fault party's full legal name].

## I. FACTUAL BACKGROUND

On [Date of incident], at approximately [Time of incident], our client, [Claimant's full legal name], was [Claimant's activity at the time of incident]. The incident occurred when [At-fault party's full legal name] [Description of incident]. This action constituted a breach of duty and directly led to the injuries suffered by our client.

## II. LIABILITY

[At-fault party's full legal name] is solely responsible for the incident and our client's resulting injuries and damages. The actions of [At-fault party's full legal name] demonstrate clear negligence, as [Explanation of why the at-fault party is liable]. This negligence was the direct and proximate cause of our client's injuries.

## III. INJURIES AND MEDICAL TREATMENT

As a direct result of the aforementioned incident, [Claimant's full legal name] sustained the following injuries: [Description of injuries sustained].

Immediately following the incident, [Claimant's full legal name] sought medical attention from [Name of medical provider] on [Date of first medical treatment]. The course of treatment included [Description of medical treatment received]. Our client's treating physician was [Name of treating physician].

#### **IV. DAMAGES**

Our client has incurred significant damages as a result of this incident. The total amount of medical expenses incurred to date is \$[Total amount of medical expenses claimed]. No future medical expenses are anticipated.

Our client is not claiming lost income or loss of earning capacity. No other economic damages, such as property damage or out-of-pocket expenses, are being claimed. Furthermore, our client is not claiming non-economic damages (e.g., pain and suffering, emotional distress, loss of enjoyment of life), nor are punitive or exemplary damages being sought.

#### **V. DEMAND FOR SETTLEMENT**

Based on the foregoing, and to compensate our client for the injuries and damages sustained, we hereby demand a settlement in the amount of \$[Specific settlement amount requested].

We expect a prompt and substantive response to this demand. Should we not receive a satisfactory offer, we will be compelled to pursue all available legal remedies to protect our client's interests, including the initiation of litigation.

Sincerely,

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**Date:** [date signed]

**Print Name:** [Claimant's Attorney/Representative Full Legal Name]

**Title:** [Attorney/Representative Title]

**Firm:** [Law Firm Name]

**Address:** [Law Firm Street Address]

[Law Firm City, State, Zip Code]

**Phone:** [Law Firm Phone Number]

**Email:** [Law Firm Email Address]