

# CAR ACCIDENT DEMAND LETTER

Date \_\_\_\_\_, 20\_\_\_\_

Dear \_\_\_\_\_,

This letter is recognized as official notice that payment is being demanded for the car accident that occurred on \_\_\_\_\_, 20\_\_\_\_. The total demand amount, after calculating direct payments along with the pain and suffering of the event, is \$\_\_\_\_\_.

A breakdown of the total amount is as follows:

INJURIES/TREATMENT: \$ \_\_\_\_\_  
OUT-OF-POCKET EXPENSES: \$ \_\_\_\_\_  
LOST WAGES/EARNINGS: \$ \_\_\_\_\_  
PAIN AND SUFFERING: \$ \_\_\_\_\_

## STATEMENT OF FACTS: CAR ACCIDENT

On \_\_\_\_\_, 20\_\_\_\_, at approximately \_\_\_\_:\_\_\_\_  AM  PM the following accident occurred as described: \_\_\_\_\_

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## INJURIES AND TREATMENT

Directly due to the car accident I had to sustain the following medical treatment: \_\_\_\_\_

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## OUT-OF-POCKET EXPENSES

As a result of the car accident I was required to come up with the following out-of-pocket expenses: \_\_\_\_\_



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**LOST WAGES/EARNINGS**

After the car accident, I lost the following wages and earnings as described: \_\_\_\_\_

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**PAIN AND SUFFERING**

In consequence to the described events, I suffered the following: \_\_\_\_\_

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After careful consideration of the issues involved in this claim, and a review of jury verdicts and insurance company settlements with similar fact patterns, I believe the total demand amount is represents a fair and equitable settlement amount.

Sincerely,

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