



# Model Reservation of Rights Letter

*Please consider using the following model text. We suggest you save (copy/paste) it and tailor it to your specific needs.*

Claims adjuster:

Insurer:

Insurance contract/Policy no.:

Insured:

Date of event/loss:

Description event/loss (optional):

1. The Insured reported a loss to the Insurer on [date];
2. The Insurer does not **currently** have sufficient information to determine if the reported loss or event is deemed eligible under the terms of the Insurance Policy;
3. The Insurer intends to carry out the research, investigations or adjustments that it deems necessary and appropriate with respect to both the event/loss and the requests arising from it, without prejudice to its rights, until all such actions have been completed;
4. In particular, the Insurer wishes to notify you that: [details of the issue];
5. The Insurer informs the Insured (or the third party) that it reserves its rights, in particular the right to refuse to compensate the Insured (or the third party) if the claim is deemed ineligible;
6. Measures and actions taken by the Insurer do not affect the respective rights of the parties under the terms of the Policy, and do not signify the Insurer's agreement to cover the risk;
7. If money is spent on repairs, repairing damages or settling a claim, the Insurer reserves the right to claim reimbursement from the Insured (or the third party) for any amount spent.

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Signature – Claims adjuster:

Date:

c.c. Broker (if applicable)