October 1, 2014

Attn:

RE: **Mortgagee Claim**

Claim Number:

Policy Number:

Insured:

Date of Loss:

Property Location:

Dear:

Enclosed please find two Releases for settlement of the claims. The forms must be signed at the lower right where it says signature. The signature should be witnessed by a disinterested party and dated.

We have enclosed copies of both of our estimates for your review.

The completed form should be returned to me promptly in order for the Massachusetts Property Insurance Underwriting Association (MPIUA) to process your payment.

If you have any questions, please do not hesitate to contact me at \_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Very truly yours,

Claims Adjuster

Enclosures.