

SAMPLE MINI TORT LETTER

Date

At-Fault Driver's Auto Insurance Company
Address (City, State, Zip)

Re: Mini Tort claim related to car accident on (date) involving your insured
Your Insured: Name, policy number, vehicle and vehicle registration number

Dear (Auto Insurance Company name):

Please find enclosed the following information in support of my claim for a mini tort recovery:

1. UD-10 Police/Traffic Crash Report related to the accident
2. Declaration Sheet for my auto insurance policy
3. Estimate of cost to repair damage to my motor vehicle (or photos of damage if unable to get an estimate)

Kindly forward the \$1,000* mini tort payment (or \$3,000* mini tort payment for accidents occurring after July 1, 2020) to me and please make the check payable to me in my name.

*[*NOTE: The person making a mini tort claim may need to adjust the amount of the payment being requested because a mini tort recovery is limited to the lesser of the mini-tort maximum, the person's collision deductible amount, or the actual damage amount if the person has no collision coverage.]*

Any and all releases that you may wish for me to sign must reference **ONLY** my property damage or mini tort claim.

Additionally, any and all releases that you may wish for me to sign in connection with resolution of my mini tort claim **MUST NOT** reference, encompass, restrict, limit, foreclose, release, discharge or otherwise preclude any third-party claims, first-party claims and/or other causes of action that I may have as a result of the above referenced car accident.

Similarly, any and all payments and/or checks in satisfaction of my mini tort claim should reference only my mini tort claim and not include any language to the effect of "full and final payment" or "full and final payment of all claims."

Your prompt attention to this matter will be greatly appreciated.

Very truly yours,

(Name of person making a mini tort claim)