

# Letter of Appeal for Late Payment Penalty Waiver

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Company's Name]

[Company's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to formally appeal for a waiver of the late payment penalty applied to my account due to my current financial hardship. My account number is [Insert Account Number].

Unfortunately, I have been facing [briefly describe your financial hardship, e.g., loss of job, medical expenses, etc.], which has made it difficult for me to meet my financial obligations. I fully understand the importance of timely payments and have always strived to maintain a positive payment history.

I kindly request your understanding and consideration regarding this matter. I am committed to resolving my outstanding balance and returning to a stable financial situation. A waiver of the late payment penalty would significantly alleviate my current financial stress.

Thank you for taking the time to consider my request. I look forward to your favorable response.

Sincerely,

[Your Name]