

# Request for Telecom Fee Waiver

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

To: [Telecom Provider Name]

[Company Address]

[City, State, Zip Code]

Dear [Customer Service Manager/Specific Name],

I hope this letter finds you well. I am writing to formally request a waiver for my telecom fees due to my status as an individual with a disability. My current circumstances make it increasingly challenging to maintain my regular payments, and any assistance would be greatly appreciated.

As a disabled individual, I am currently facing [briefly explain your situation, e.g., financial hardships, medical expenses] which has made it difficult to cover my telecom costs. My account number is [Your Account Number].

I am aware of your policies regarding assistance for individuals with disabilities and I kindly request that you consider my application for a fee waiver. Attached you will find any required documentation, including [list any documents you are including, e.g., disability certification, financial statements].

Thank you for your consideration. I look forward to your prompt response regarding my request. Please feel free to contact me at [Your Phone Number] or [Your Email Address] for any further information.

Sincerely,

[Your Name]