

Notification of Reinstatement Fee Waiver

Date: [Date]

To: [Recipient's Name]

[Recipient's Address]

Dear [Recipient's Name],

We are writing to inform you that, due to extenuating circumstances, your request for a reinstatement fee waiver has been approved. We recognize the challenges you have faced, and we are committed to supporting you during this time.

Your reinstatement fee has been waived as of [Effective Date]. Please ensure that you complete any additional necessary steps to finalize your reinstatement.

If you have any questions or require further assistance, please do not hesitate to contact us at [Contact Information].

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Position]

[Your Company/Organization]

[Your Contact Information]