

# Application for License Modification

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient Name]

[Recipient Title]

[Company/Organization Name]

[Address]

[City, State, Zip Code]

Dear [Recipient Name],

I am writing to formally request a modification to my existing license, [License Number], issued on [Issue Date].

The modification I am seeking is as follows:

- [Detail the modification requested]
- [Explanation for the modification]

I believe this modification is necessary due to [brief explanation of reasons]. I have attached all relevant documents to support my request.

I appreciate your attention to this matter and look forward to your prompt response. Please feel free to contact me at [Your Phone Number] or [Your Email Address] if you require any further information.

Thank you for considering my application.

Sincerely,

[Your Name]

[Your Title/Position, if applicable]