## **Personal License Cancellation Appeal**

Date: [Insert Date]

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

[Licensing Authority Name] [Licensing Authority Address] [City, State, Zip Code]

Dear [Licensing Authority Title and Last Name],

I am writing to formally appeal the cancellation of my personal license, [License Number], as communicated to me on [Date of Cancellation Notice]. I understand the concerns that led to this decision and would like to present my case for your reconsideration.

Firstly, I would like to express my regret regarding the circumstances that resulted in the cancellation. [Briefly explain reasons for cancellation and any mitigating factors.]

I assure you that I am committed to rectifying the issues and adhering to all licensing regulations in the future. [Include any steps you have taken to improve or comply with regulations.]

In light of the above, I respectfully request a review of my case and hope for the reinstatement of my license. Thank you for considering my appeal. I look forward to your response.

Sincerely,

[Your Name]