

# Formal Objection to Occupational License Decision

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

[Recipient Name]  
[Title/Position]  
[Licensing Authority/Organization]  
[Address]  
[City, State, Zip Code]

Dear [Recipient Name],

I am writing to formally object to the decision made on [Date of Decision] regarding my application for an occupational license in [specific field or occupation]. My application was denied on the basis of [briefly state the reasons given for denial].

I believe that the decision may have been based on [reason for objection, e.g., misunderstandings, missing information]. I kindly request a review of my application and a reconsideration of the factors involved in the decision-making process.

I am prepared to provide additional documentation and clarification to support my case. Please find attached [mention any additional documents if applicable].

I appreciate your attention to this matter and look forward to your prompt response.

Sincerely,

[Your Name]

[Your Signature if sending a hard copy]