

# Request for Injury Report Deadline Extension

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Recipient's Name]

[Recipient's Title]

[Company/Organization Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally request an extension for the submission of the injury report related to [specific incident or case]. The original deadline for submission is [original deadline date]. However, due to [brief explanation of reasons for the request, e.g., ongoing medical treatment, lack of access to necessary information], I am unable to meet this deadline.

I request an additional [number of days/weeks] to complete and submit the report. I believe this extension will allow me to provide a more comprehensive and accurate report.

Thank you for considering my request. I appreciate your understanding and support in this matter. Please let me know if you need any more information.

Sincerely,

[Your Name]