

Application for Special Rate on Extended Stay

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

[Hotel Name]
[Hotel Address]
[City, State, Zip Code]

Dear [Hotel Manager's Name],

I am writing to formally request a special rate for an extended stay at your hotel due to ongoing medical treatment that I am currently undergoing. I have been advised by my doctor to stay in the area for [duration] to facilitate my treatment.

My anticipated dates of stay are from [start date] to [end date]. I would greatly appreciate any assistance you can provide in terms of offering a special rate for my extended stay, as this would significantly help ease the financial burden during this challenging time.

I can provide any necessary documentation from my healthcare provider to verify my situation, if required. Thank you for considering my request, and I look forward to your positive response.

Sincerely,

[Your Name]