

Occupational License Renewal Appeal

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Recipient Name]

[Title]

[Department/Agency Name]

[Address]

[City, State, Zip Code]

Dear [Recipient Name],

I am writing to formally appeal the decision regarding the renewal of my occupational license, which was denied on [date of denial]. My license number is [license number]. I believe that there may have been a misunderstanding related to my application, and I would like to provide further information and request reconsideration.

[Briefly explain the reason for the denial, your circumstances, and any relevant information that supports your appeal.]

I have attached [any supporting documents, if applicable] to this letter for your review. I sincerely hope that you will reconsider my appeal and allow me to retain my occupational license.

Thank you for your time and understanding. I look forward to your prompt response.

Sincerely,

[Your Name]