

# Fine Reconsideration Outcome

Date: [Insert Date]

[Recipient's Name]

[Recipient's Address]

Dear [Recipient's Name],

We have received your request for reconsideration regarding the fine issued on [Insert Date of Fine]. After a thorough review of your appeal and the associated documentation, we regret to inform you that your request for reconsideration has been [approved/denied].

If approved, the details of the decision are as follows:

- Fine Amount: \$[Insert Amount]
- Revised Fine (if applicable): \$[Insert Amount]
- Due Date for Revised Fine (if applicable): [Insert Date]

If denied, please find the reasons below:

- [Reason 1]
- [Reason 2]
- [Reason 3]

You have the right to appeal this decision further. If you wish to proceed, please contact our office by [Insert Deadline for Further Appeal].

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Position]

[Your Organization]

[Contact Information]