

Letter of Application for Foreign Loan

Date: [Insert Date]

To,

The Loan Officer,
[Bank/Financial Institution Name],
[Bank Address],
[City, State, Zip Code]

Subject: Application for Foreign Loan for Medical Expenses

Dear Sir/Madam,

I, [Your Full Name], residing at [Your Address], hold an account with your esteemed institution (Account Number: [XXX]). I am writing this letter to formally apply for a foreign loan to cover significant medical expenses incurred by me/ my family.

Due to [brief description of medical condition], I have been advised to undergo [medical treatment or procedure] which is not available locally. The total cost of the treatment is estimated to be [total amount]. I kindly request your support in providing a loan of [amount requested] to assist in covering these medical expenses.

I assure you that I will repay the loan over a period of [repayment period], and I have prepared the necessary documents to support this application, including my financial statements, proof of medical expenses, and identification.

Thank you for considering my application. I look forward to your favorable response.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Full Name]
[Your Contact Number]
[Your Email Address]