

Residency Evidence Appeal

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Recipient Name]

[Recipient Title]

[Organization Name]

[Organization Address]

[City, State, Zip Code]

Subject: Appeal for Residency Evidence Determination

Dear [Recipient Name],

I am writing to formally appeal the decision made regarding my residency evidence submitted on [insert date of submission]. I believe that the documentation I provided clearly demonstrates my residency in [insert location] during the relevant period.

In your correspondence dated [insert date of decision], it was stated that my evidence was insufficient due to [briefly state the reason mentioned]. I would like to address this concern and submit additional documentation, including [list any new evidence or clarification you are providing].

Additionally, I want to highlight [mention any pertinent details or circumstances that support your appeal]. I appreciate the consideration of my appeal and am hopeful for a positive resolution.

Thank you for your time and attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]