

# Application for Temporary Payment Extension

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Recipient Name]

[Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient Name],

I am writing to formally request a temporary extension on my payment due on [insert due date]. Due to [briefly explain reason, e.g., unexpected financial hardship, medical expenses], I am unable to meet the payment deadline as agreed.

I kindly ask for your understanding in this matter and request an extension of [insert duration, e.g., 30 days] to allow me the necessary time to arrange for the payment. I am committed to resolving this matter and assure you that I will make the payment by [insert proposed payment date].

Thank you for considering my request. I hope to hear from you soon. Should you need any further information, please do not hesitate to contact me at [your phone number] or [your email].

Sincerely,

[Your Name]