

# Request for Reconsideration of Late Filing Penalty

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Recipient's Title]

[Department/Authority Name]

[Department Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to request a reconsideration of the late filing penalty assessed against me for [Specify Tax Form/Document] for the tax year [Insert Year].

The penalty was assessed due to [Briefly explain reason for late filing, e.g., unforeseen circumstances, medical issues, etc.]. I have taken full responsibility for the late submission and have since taken measures to ensure timely compliance in the future.

I kindly ask that you review my situation and the circumstances surrounding my late filing. Attached to this letter, you will find [mention any supporting documents, e.g., medical records, proof of circumstances].

Thank you for considering my request. I greatly appreciate your time and attention to this matter. I look forward to your favorable response.

Sincerely,

[Your Name]