

# Forbearance Plan Repayment Terms Overview

Date: [Insert Date]

Your Name: [Insert Your Name]

Your Address: [Insert Your Address]

Your City, State ZIP: [Insert City, State ZIP]

Dear [Insert Recipient's Name],

We appreciate your engagement and commitment in addressing your financial situation. This letter outlines the repayment terms for the forbearance plan we have agreed upon.

## Forbearance Plan Details:

- **Forbearance Period:** [Insert Start Date] to [Insert End Date]
- **Total Amount Suspended:** \$[Insert Amount]
- **Monthly Payments Resumed:** [Insert Resumption Date]
- **Monthly Payment Amount:** \$[Insert Payment Amount]
- **Additional Payment Plan:** [Insert Details if Applicable]

Please ensure that the payments are made on or before the due date to avoid any penalties or additional fees. Should you have any questions or require further clarification, feel free to contact us at [Insert Contact Information].

Thank you for your cooperation.

Sincerely,

[Your Name]

[Your Title]

[Your Company]

[Your Company Address]

[Your Company Phone Number]