

# Appeal for Denied Housing Assistance

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

[Recipient's Name]

[Title]

[Department Name]

[Agency Name]

[Agency Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally appeal the recent decision regarding my application for housing assistance submitted on [insert submission date]. I appreciate your review of my application; however, I believe that my request was unjustly denied based on [briefly state the reason given].

In support of my appeal, I would like to provide additional information that may not have been fully considered during the initial review process. [Explain your situation, any changes in your circumstances, and why you believe you qualify for assistance].

Given my financial situation and the urgent need for stable housing, I kindly request a re-evaluation of my application. I believe that the provided documentation will substantiate my eligibility for assistance under your program.

Thank you for your attention to this matter. I look forward to your prompt response and hope for a favorable reconsideration of my application.

Sincerely,

[Your Name]