

Late Fee Waiver Request

Your Name: [Your Name]

Your Address: [Your Address]

City, State, Zip: [City, State, Zip]

Email Address: [Your Email]

Phone Number: [Your Phone Number]

Date: [Date]

Credit Card Company Name

Company Address

City, State, Zip

Dear Customer Service Team,

Subject: Request for Waiver of Late Fee

I am writing to formally request a waiver for the late fee applied to my account (Account Number: [Your Account Number]).

Due to [brief explanation of the reason for the delay, e.g., unexpected medical expenses, job loss], I was unable to make my payment by the due date of [due date]. I sincerely apologize for this oversight and assure you it is not reflective of my usual payment habits.

I have been a loyal customer since [year], maintaining a consistent payment record. Given my history, I kindly ask that you consider waiving the late fee of [amount] as a gesture of goodwill.

Thank you for your understanding and consideration. I look forward to your positive response.

Sincerely,

[Your Name]