

Application for Delay in Payment Schedule

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Recipient's Title]

[Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to formally request a delay in my current payment schedule due to unforeseen circumstances that have affected my financial situation.

Due to [briefly explain the reason, e.g., medical expenses, job loss, etc.], I am unable to meet the upcoming payment deadline set for [insert due date]. I kindly request an extension of [number of days/weeks] which would allow me to recover and meet the obligation without compromising my financial stability.

I appreciate your understanding and consideration of my request. I am committed to fulfilling my obligations and maintaining our positive relationship. Please let me know if we can work together to modify the payment schedule accordingly.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]