

Payment Plan Modification Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

[Recipient's Name]

[Company/Organization 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 modification to my current payment plan for [specific account or loan number]. Due to [brief explanation of circumstances, e.g., financial difficulties, job loss, medical expenses], I am unable to adhere to the original terms of my payment plan.

I propose the following adjustments:

- New payment amount: [insert new amount]
- Payment frequency: [insert frequency, e.g., monthly, bi-weekly]
- Duration of the modified plan: [insert duration]

I believe that this modification will allow me to meet my obligations more effectively and avoid any defaults. I am committed to fulfilling my responsibilities and appreciate your understanding during this challenging time.

Thank you for considering my request. I am looking forward to your prompt response so we can work together to resolve this matter.

Sincerely,

[Your Name]