

Request for Review of Extended Payment Denial

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Recipient's Name]

[Recipient's Position]

[Company/Organization Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally request a review of the recent denial of my extended payment request dated [insert date of denial]. I understand that my application was denied based on [insert reason], however, I believe there may have been some discrepancies that warrant reconsideration.

As a valued customer of [Company/Organization Name], I have consistently maintained my account and have faced unforeseen circumstances that have led to my request for extended payment options. I kindly ask you to re-evaluate my case and consider the following information:

- [Provide relevant detail 1]
- [Provide relevant detail 2]
- [Provide relevant detail 3]

Thank you for your understanding and consideration of my request. I look forward to your prompt response and hope for a favorable resolution to this matter.

Sincerely,

[Your Name]