

Late Fee Consideration Request

Dear [Credit Card Company Name],

I hope this message finds you well. I am writing to formally notify you of circumstances that have affected my ability to make a timely payment on my credit card account [Account Number].

Unfortunately, due to [briefly explain circumstances, e.g., unexpected medical expenses, job loss, etc.], I was unable to submit my payment by the due date of [Due Date]. I sincerely apologize for this oversight and any inconvenience it may have caused.

Given these circumstances, I kindly request that you consider waiving the late fee of [Late Fee Amount] associated with my account. I have a history of timely payments and value my relationship with your institution.

Thank you for your understanding and consideration of my request. I appreciate your assistance during this challenging time. Please let me know if you need any further information.

Sincerely,

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Phone Number]

[Your Email Address]