## **Credit Card Late Fee Waiver Request**

[Your Name]
[Your Address]
[City, State, ZIP Code]
[Email Address]
[Phone Number]
[Date]

[Credit Card Company Name] [Company Address] [City, State, ZIP Code]

Dear Customer Service Team,

I am writing to respectfully request a waiver for the late fee charged to my credit card account (Account Number: [Your Account Number]). Due to [brief explanation of the reason for the late payment, e.g., unexpected circumstances, medical emergency], I was unable to make my payment on time.

I have been a loyal customer since [Year] and have consistently made timely payments. I kindly ask for your understanding and consider waiving the late fee this one time.

Thank you for your attention to this matter. I appreciate your understanding and hope to continue my positive relationship with your institution.

Sincerely,

[Your Name]