Application for Credit Card Grace Period Extension

Date: [Insert Date]

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

[Credit Card Company Name] [Customer Service Department] [Company Address] [City, State, Zip Code]

Dear [Credit Card Company Representative's Name],

I hope this message finds you well. I am writing to formally request an extension of the grace period on my credit card account (Account Number: [Your Account Number]). Due to [brief explanation of circumstances, e.g., unexpected financial hardship, medical expenses], I am currently facing challenges in managing my payments.

I have been a loyal customer since [Your Account Opening Date] and have consistently made my payments on time. I kindly ask for your understanding and consideration to grant me an extension on the grace period for my upcoming payment due on [Due Date]. This adjustment would greatly alleviate my current financial burden.

Thank you for considering my request. I appreciate your time and assistance. Please let me know if you require any additional information or documentation to support my application.

Sincerely,

[Your Name]