

# Debt Relief Discharge Application

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

[Creditor Name]

[Creditor Address]

[City, State, Zip Code]

Dear [Creditor Name],

I am writing to formally request a discharge of my debts under the debt relief program. My name is [Your Full Name], and my account number is [Account Number]. Due to [brief explanation of your financial hardship], I am unable to continue making payments on my accounts.

As per the guidelines of the debt relief program, I believe that I qualify for a discharge of my debts. I have attached all necessary documentation that supports my application, including [list of documents].

I kindly ask you to review my application and consider my request for debt relief discharge. Please feel free to contact me at [Your Phone Number] or [Your Email Address] should you require any further information.

Thank you for your attention to this matter.

Sincerely,

[Your Signature]

[Your Printed Name]