

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

[Date]

[Recipient Name or Department]
[Company Name]
[Company Address]
[City, State, Zip Code]

Subject: Request for Reinstatement of [Account/Policy/Membership] Number: [Number]

Dear [Recipient Name],

I am writing to formally request the reinstatement of my [Account/Policy/Membership], which was cancelled on [Date of Cancellation].

The cancellation occurred due to [briefly state reason, e.g., an oversight in payment / a temporary change in circumstances]. I value the services provided by [Company Name] and would like to resume my relationship with you immediately.

I have enclosed [mention any payment or required documentation] to cover any outstanding balances and to facilitate the reinstatement process. Please let me know if there are any additional forms or fees required to reactivate my account.

Thank you for your time and assistance in this matter. I look forward to receiving confirmation that my account has been reinstated.

Sincerely,

[Your Signature]

[Your Printed Name]