

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Title]
[Organization's Name]
[Organization's Address]
[City, State, Zip Code]

Dear [Recipient's Name],

Subject: Request for Personal Independence Payment (PIP)

I hope this letter finds you well. I am writing to formally request the initiation of my application for Personal Independence Payment (PIP).

[Briefly explain your reason for requesting PIP, including any relevant medical conditions or situations that affect your daily life.]

Enclosed with this letter are the necessary documents supporting my request, including [list any attached documents, such as medical reports, identification, etc.].

I would appreciate your prompt attention to this matter and look forward to your response. Thank you for considering my request.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]