

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

[Recipient's Name]  
[Office of Housing Benefits]  
[Agency Name]  
[Agency Address]  
[City, State, Zip Code]

Subject: Appeal for Dwelling Allowance Decision

Dear [Recipient's Name],

I hope this message finds you well. I am writing to formally appeal the decision regarding my dwelling allowance application (Case Number: [Your Case Number]).

I was informed on [Date of Decision] that my application was denied due to [reason for denial]. I believe this decision may have been made in error for the following reasons:

1. [Provide your first reason or argument with supporting details]
2. [Provide your second reason or argument with supporting details]
3. [Provide any additional reasons or arguments, if applicable]

Given the circumstances and additional information I am providing, I kindly request that you reconsider my application for the dwelling allowance. I have attached [list any documents you are including, e.g., pay stubs, rental agreements, etc.] to support my appeal.

I appreciate your attention to this matter, and I am hopeful for a positive resolution. Please feel free to contact me at [Your Phone Number] or [Your Email Address] if you require any further information.

Thank you for your assistance.

Sincerely,

[Your Name]

[Your Signature if sending a hard copy]