

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

[Recipient Name]  
[Title/Position]  
[Organization Name]  
[Organization Address]  
[City, State, Zip Code]

Dear [Recipient Name],

Subject: Appeal for NLDC Application Decision

I am writing to formally appeal the decision regarding my NLDC application, reference number [Application Number], submitted on [Submission Date].

[Introduction: Briefly state the purpose of your appeal and the decision you are challenging.]

[Body: Explain the reasons for your appeal, providing any relevant details, evidence, or documentation to support your case. Be clear and concise.]

[Conclusion: Summarize your request for reconsideration and express your willingness to provide any further information if needed.]

Thank you for considering my appeal. I look forward to your prompt response.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]