

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

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

Dear [Recipient Name],

Subject: Request for Approval of Oxygen Tank Usage

I am writing to formally request approval for the usage of an oxygen tank for [specific purpose or patient's name]. This request arises due to [briefly explain the reason for the request, e.g., medical necessity, safety requirements, etc.].

According to [relevant guidelines, medical prescriptions, or policies], the utilization of an oxygen tank is essential to [explain how it benefits the patient or situation]. We have considered all possible alternatives, and after consultation with [name of the medical professional or authority], it has been determined that this is the most suitable option.

I have attached all necessary documentation, including [list of attached documents: physician's letter, medical records, etc.], to support this request. I kindly ask for your prompt attention to this matter and hope to receive your approval at your earliest convenience.

Thank you for considering this request. I am available for any further discussions or clarifications you may require.

Sincerely,

[Your Name]
[Your Position, if applicable]
[Your Institution/Organization, if applicable]