

[Your Name]
[Your Address]
[Your Phone Number]
[Your Email Address]

[Date]

[Bank Name]
[Bank Branch Address]
[City, State, Zip Code]

Subject: Request for Temporary Overdraft Limit Increase - Account Number: [Your Account Number]

Dear [Bank Manager Name or Customer Service Department],

I am writing to formally request a temporary increase in the overdraft limit on my [Type of Account, e.g., Personal Checking] account, number [Your Account Number].

Currently, my overdraft limit is \$[Current Limit]. I would like to request an increase to a total limit of \$[Requested Limit]. I require this temporary adjustment for a period of [Number of Days/Weeks], starting from [Start Date] until [End Date].

The reason for this request is [briefly state reason, e.g., unexpected medical expenses, a delay in client payments, or emergency home repairs]. I expect to receive funds to cover this amount and return the account to its normal status by [Date].

I have been a loyal customer with [Bank Name] since [Year], and I have consistently managed my account responsibly. I am confident in my ability to repay the overdraft within the timeframe mentioned above.

Please let me know if there are any specific forms I need to complete or if you require further documentation to process this request. Thank you for your time and assistance.

Sincerely,

[Your Signature (if sending by mail)]

[Your Printed Name]