

[Date]

[Customer Name]

[Customer Address]

[City, State, Zip Code]

Subject: Decision Regarding Non-Sufficient Funds (NSF) Fee Waiver Request

Dear [Customer Name],

We have received and reviewed your request for a waiver of the Non-Sufficient Funds (NSF) fee(s) assessed to your account, ending in [Last 4 Digits of Account Number], on [Date fee was charged].

After a thorough review of your account history and the circumstances provided, we regret to inform you that we are unable to grant your request for a fee waiver at this time. Our records indicate that the fee was applied correctly in accordance with the terms and conditions of your account agreement.

To help you avoid future overdraft or NSF fees, we recommend the following tools:

- Setting up low-balance email or text alerts.
- Enrolling in Overdraft Protection linked to a savings account.
- Monitoring your balance regularly through our mobile app or online banking.

If you have any questions regarding this decision or would like to discuss ways to manage your account more effectively, please contact us at [Phone Number] or visit your local branch.

Thank you for banking with [Bank Name].

Sincerely,

[Your Name/Department Name]

[Bank Name]