

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

[Customer Name]  
[Customer Address]  
[City, State, Zip Code]

Subject: Regarding your request for a fee waiver for Account Number: [Last 4 Digits of Account]

Dear [Customer Name],

We have received your request dated [Date of Request] to waive the Insufficient Funds (NSF) fee(s) charged to your account on [Date Fee Incurred].

After reviewing your account history and the details of the transaction, we regret to inform you that we are unable to grant a waiver at this time. Our decision is based on the following reason(s):

- The number of fee waivers previously granted to this account has reached the maximum limit allowed.
- The account does not meet the eligibility requirements for fee reversals under our current policy.
- The transaction was processed correctly according to the terms and conditions of your account agreement.

The fee of \$[Amount] will remain as charged. To avoid future fees, we recommend monitoring your balance through our mobile app or setting up low-balance alerts.

If you have any questions regarding this decision, please contact our customer service department at [Phone Number] or visit your local branch.

Sincerely,

[Staff Name/Department]  
[Bank Name]