Date: [Insert Date]

[Recipient Name]
[Title]
[Institution Name]
[Address Line 1]
[Address Line 2]

Subject: Notice of Revised Deposit Insurance Assessment Rate Adjustment

Dear [Recipient Name],

This letter serves as formal notification regarding a revision to your institution's deposit insurance assessment rate. Based on the most recent evaluation of [Institution Name]'s financial profile and current regulatory guidelines, your assessment rate has been adjusted.

Summary of Adjustment:

- **Previous Assessment Rate:** [Old Rate]%
- **New Assessment Rate:** [New Rate]%
- **Effective Date:** [Insert Effective Date]

The adjustment is based on the following factors:

- Changes in the institution's risk category or financial ratios.
- Updates to the statutory assessment rate schedules.
- [Insert additional specific reason if applicable].

The new rate will be applied to the assessment period beginning [Date] and will be reflected in the invoice scheduled for [Month, Year].

If you have any questions regarding this adjustment or the methodology used to calculate this rate, please contact the [Department Name] at [Phone Number] or via email at [Email Address].

Sincerely,

[Signature]
[Name of Sender]
[Title/Department]
[Organization Name]