

**Date:** [Insert Date]

**Customer Name:** [Insert Customer Name]

**Account Number:** [Insert Account Number]

**Address:** [Insert Customer Address]

# Subject: Overdraft Repayment Plan Agreement

Dear [Insert Customer Name],

This letter serves as a formal agreement regarding the repayment of the outstanding overdraft balance on your account. As of [Insert Date], your total overdrawn balance is **[\$[Insert Total Amount]]**.

We have agreed to the following repayment schedule:

- **Total Repayment Amount:** **[\$[Insert Total Amount]]**
- **Installment Amount:** **[\$[Insert Monthly/Weekly Amount]]**
- **Frequency:** [Insert Frequency, e.g., Monthly]
- **Start Date:** [Insert Start Date]
- **Number of Installments:** [Insert Number]

## Terms and Conditions:

1. Payments must be received by the [Insert Day, e.g., 5th] of every month.
2. If a payment is missed, the full outstanding balance may become due immediately.
3. Your account may be subject to restricted use until the balance is cleared.
4. Interest [will/will not] continue to accrue during this period.

Please sign and return a copy of this letter to confirm your acceptance of these terms.

**Customer Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Sincerely,

[Insert Name/Department]

[Insert Company Name]

[Insert Contact Phone Number]