

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Your Phone Number]  
[Your Email Address]

[Date]

[Contact Name/Department]  
[Organization Name]  
[Address]  
[City, State, Zip Code]

**Subject: Request for Reinstatement of Expired Conditional Approval -  
[Reference/Application Number]**

Dear [Contact Name],

I am writing to formally request the reinstatement of my conditional approval for [Project/Loan/Program Name], which expired on [Expiration Date].

The conditional approval expired due to [briefly state reason, e.g., unexpected delays in documentation / personal emergencies / administrative oversight]. However, I remain fully committed to meeting the remaining requirements and proceeding with the final approval process.

I have attached the following updated documents to support this request:

- [Document 1]
- [Document 2]
- [Document 3]

Please let me know if there are any additional fees or updated forms required to restore my status. I appreciate your time and consideration in reviewing this request.

Sincerely,

[Your Signature]

[Your Printed Name]