

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

[Date]

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

RE: Notice of Delinquent Balance - Account #[Account Number]

Dear [Debtor Name],

This letter is regarding your outstanding balance of \$[Total Amount Past Due] for [Service/Product Provided]. Our records show that your account is now [Number] days past due.

We value your business and understand that financial difficulties can happen. To assist you in resolving this debt, we would like to offer the following monthly payment plan:

- **Initial Payment:** \$[Amount] due by [Date]
- **Monthly Installments:** \$[Amount] per month
- **Duration:** [Number] months
- **Payment Due Date:** [Day of the month, e.g., 1st or 15th]

By following this plan, you can bring your account back into good standing without further collection actions or late fees. This offer is valid until [Expiration Date].

To accept this offer, please sign below and return this letter along with your first payment. You may also contact us at [Phone Number] to set up automatic payments.

If you have already sent your payment, please disregard this notice.

Sincerely,

[Your Name/Department]
[Your Company Name]

Acceptance of Payment Plan

I, [Debtor Name], agree to the payment terms outlined above.

Signature: _____ Date: _____