

Template: Acknowledge Request for Occupancy Waiver

Date

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Mr. John Doe
Board Chairperson
ABC Federal Credit Union
Address
City, State Zip

Dear Mr. Doe:

We received your request for a waiver of the partial occupancy / disposal of abandoned property requirement established in §701.36 of NCUA rules and regulations on [date]. We will respond to your request by [within 45 days of receipt].

If you have any questions, please contact examiner [examiner name] at [phone number].

Sincerely,

[Name]
Director of Supervision

[Office]/[WRITER'S INITIALS]
SSIC XXXX
Charter #

cc: SE
EX
SSA (when applicable)