IMPAIRED ACCOUNT STATUS STATEMENT

Statement Date: **Account Number:**
Reference ID:

DEBTOR INFORMATION

Account Name:

Contact Person:

Address:

Phone / Email:

DELINQUENCY STATUS

Classification:

Days Delinquent:

Last Payment Date:

Last Payment Amt:

AGING ANALYSIS OF OUTSTANDING BALANCE

Current	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days

FINANCIAL SUMMARY & STATEMENT OF ACCOUNT

Item Description	Amount Due
Outstanding Principal Balance	
Accumulated Interest Charges	
Late Fees & Administrative Penalties	
Legal / Collection Costs Incurred	
Total Impaired Balance Outstanding	

URGENT NOTICE & ACTION REQUIRED

The account listed above has been classified as impaired/delinquent. Please review the statement of outstanding balances. Immediate remittance or formal contact is required to resolve this status and prevent further escalation, which may include suspension of services, reporting to credit agencies, or transfer to external legal collection processes.

Prepared By (Credit/Collections Officer)

Authorized Signature / Date