(**Today’s Date**)

(**Your Name**)

(**Your Address**)

Subject: (**Name of Account & Account Number**)

Dear (**Creditor/Collection Companies Name**),

This letter is being sent to you in response to a notice sent to me on (**Date of Collection Letter**). This is not a refusal to pay, but a notice sent pursuant to the Fair Debt Collection Practices Act, 15 USC 1692g Sec. 809 (8), stating your claim is disputed, and debt validation is requested.

Please note, this is **NOT** a request for “verification” or proof of my mailing address, but a request for **VALIDATION** made pursuant to the above-named Title and Section. I request your offices provide me with the evidence that I have any legal obligation to pay you.

I’m also informing you that if your offices have reported invalidated information to any of the 3 major credit bureaus (Equifax, Experian, or TransUnion), this action might constitute fraud under both Federal and State Laws. Due to this fact, if any negative mark is found on any of my credit reports by your company or the company that you represent, I will not hesitate in bringing legal action against you and your client for the following: (**Violation of the FCRA, Violation of the FDCPA, Defamation of Character**)

If your offices can provide the proper documentation as requested in the following Declaration, I will require at least 30 days to investigate this information, during which time all collection activity must cease-and-desist. Also, during this debt validation period, if any action is taken which could be considered detrimental to any of my credit reports, I will consult with my legal counsel.

This includes any listing of any information to a credit reporting repository that could be inaccurate or invalidated. If your office fails to respond to this debt validation request within 30 days from the date of your receipt, all references to this account must be deleted and completely removed from my credit report, and a copy of such deletion request shall be sent to me immediately.

**CREDITOR/DEBT COLLECTOR DECLARATION**

Please provide the following:

• Agreement with your client that grants you the authority to collect on this alleged debt.

• Agreement that bears the signature of the alleged debtor wherein he/she agreed to pay the creditor.

• Any insurance claims been made by any creditor regarding this account.

• Any Judgments obtained by any creditor regarding this account.

• Name and address of alleged creditor.

• Name on file of alleged debtor.

• Alleged account number.

• Address on file for alleged debtor.

• Amount of alleged debt.

• Date this alleged debt became payable.

• Date of original charge off or delinquency.

• Verification that this debt was assigned or sold to collector.

• Complete accounting of alleged debt.

• Commission for debt collector if collection efforts are successful.

I appreciate your efforts in this matter and look forward to your response.

Sincerely,

(**Your Name**)
(**Your Address and Contact Information**)