Date

Your Name

Address

City

State Zip

Home Phone

Collection Agency

Collection Agency Address

City

State Zip

Re: Acct No

To Whom It May Concern:

I am writing this letter in response to the phone call/letter received from you on (Date). In conformance to my rights under the Fair Debt Collection Practices Act (FDCPA), I am requesting you to provide me with a validation of the debt that you talked of earlier. Please note, this is not a refusal to pay, rather a statement that your claim is disputed and validation is demanded. (15 USC 1692g Sec. 809 (b))

I do hereby request that your office provide me with complete documentation to verify that I owe the said debt and have any legal obligation to pay you.

Please provide me with the following:

1. Agreement with the creditor that authorizes you to collect on this alleged debt
2. The agreement bearing my signature stating that I have agreed to assume the debt
3. Valid copies of the debt agreement stating the amount of the debt and interest charges
4. Proof that the Statute of Limitations has not expired
5. Complete payment history on this account along with an accounting of all additional charges being assessed
6. Show me that you are licensed to collect in my state; and
7. Your license numbers and Registered Agent

If your office fails to reply to this debt validation letter within 30 days from the date of your receipt, all instances related to this account must be immediately deleted and completely removed from my credit file. Moreover, all future attempts to collect on the said debt must be ceased.

Your non-compliance with my request will also be construed as an absolute waiver of all claims to enforce the debt against me and your implied agreement to compensate me for court costs and attorney fees if I am forced to bring this matter before a judge.

Thanking you,

Your Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_