[Institution Name]
[Department Name]
[Street Address]
[City, State, Zip Code]

[Date]

[Customer Name]
[Street Address]
[City, State, Zip Code]

RE: Resolution of Stop Payment Inquiry - Reference Number: [Case Number]

Dear [Customer Name],

This letter is to formally notify you regarding the resolution of your inquiry dated [Date of Inquiry] concerning the stop payment request for the following transaction:

- **Check/Reference Number:** [Number]
- **Transaction Date:** [Date]
- **Payee Name:** [Payee Name]
- **Transaction Amount:** [Amount]
- **Account Number:** [Last 4 Digits of Account]

Resolution Status: [Confirmed / Denied / Expired]

After reviewing our records, we have determined the following:

[Insert specific details: e.g., The stop payment order has been successfully placed and will remain active until [Date]. / The request could not be processed because the item was cleared prior to the request. / The inquiry regarding the fee reversal has been approved/denied.]

If the stop payment was successful, please note that this order is typically valid for [6 months/1 year]. It is your responsibility to renew this request if the payment remains outstanding after that period.

If you have any further questions or require additional documentation, please contact our Customer Service Department at [Phone Number] or visit your local branch.

Thank you for your business.

Sincerely,

[Name of Representative]
[Title]
[Institution Name]