

Date: [Insert Date]

To: [Name of Institution/Security Manager]

Department: [Insert Department Name]

Address: [Insert Address]

Subject: Revocation of Vault Access Rights

Dear [Name of Recipient or Security Manager],

This letter serves as formal notification to revoke all vault access rights for the following individual, effective immediately:

- **Full Name:** [Individual's Full Name]
- **Employee/ID Number:** [Insert ID Number]
- **Position:** [Insert Position]
- **Vault Location/ID:** [Insert Specific Vault Name or Number]

Please ensure that all physical keys, access cards, digital codes, and biometric permissions associated with this individual are deactivated and collected. Any existing security clearances or authorization logs should be updated to reflect this change.

Kindly provide a written confirmation once the access revocation process has been completed.

Thank you for your prompt attention to this security matter.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Title/Department]

[Your Contact Information]