

[Your Name/Company Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Date]

[Contractor Name]

[Contractor Address]

[City, State, Zip Code]

**Subject: Identity Verification for Independent Contractor Engagement**

Dear [Contractor Name],

In accordance with our company compliance policy and legal requirements, we are required to verify the identity of all independent contractors prior to the commencement of services.

To complete this process, please provide clear copies of the following documents:

- A valid government-issued photo identification (e.g., Driver's License or Passport).
- Proof of Taxpayer Identification Number (e.g., Form W-9 or SSN/EIN verification).
- [Optional: Proof of business registration or professional license].

Please submit these documents via [Secure Portal Link / Encrypted Email] no later than [Date].

The information provided will be used solely for the purpose of identity verification and tax reporting compliance. We maintain strict confidentiality protocols regarding your personal data.

If you have any questions regarding this request, please contact [Department Name] at [Phone Number/Email].

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Title]