

Your Name
Your Address
Your City, State, Zip Code
Your Phone Number
Date

To: [Name of Financial Institution/Company]
Fraud Department
Address
City, State, Zip Code

RE: Notice of Identity Theft and Request for Account Closure
Account Number: [Insert Account Number]

Dear Fraud Department,

I am writing to formally notify you that I am a victim of identity theft. I did not open the account listed above, nor did I authorize anyone else to open it in my name. I am requesting that this account be closed immediately and that no further activity be permitted.

Enclosed are the following documents to verify my claim:

- A copy of my Identity Theft Report (FTC Affidavit or Police Report).
- A copy of my government-issued identification.
- Proof of my residence.

I further request that you:

1. Close the unauthorized account and issue a letter confirming the account is closed and that I am not held responsible for any charges, fees, or debts associated with it.
2. Cease any collection activity regarding this account.
3. Remove any negative information related to this account from my credit reports.

Please provide a written response within 30 days confirming that these actions have been taken. Thank you for your immediate attention to this matter.

Sincerely,

[Your Signature]

[Your Printed Name]