

# Safety Freeze Removal Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

To: [Credit Bureau Name]

[Credit Bureau Address]

[City, State, Zip Code]

Dear [Credit Bureau Name] Customer Service,

I am writing to request the removal of the safety freeze that I have placed on my credit report. The reason for this request is to allow for identity verification in connection with [mention the specific reason, e.g., loan application, credit card application, etc.].

Please find the necessary identification details below:

- Name: [Your Name]
- Social Security Number: [Your SSN]
- Date of Birth: [Your DOB]
- Address: [Your Current Address]

I would appreciate your prompt attention to this matter. Please confirm the removal of the safety freeze at your earliest convenience.

Thank you for your assistance.

Sincerely,

[Your Name]