Eligibility Determination for Telecom Services

Date: [Insert Date]

[Recipient's Name]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

We are pleased to inform you that your application for eligibility for our telecom services has been successfully determined. After reviewing your submission, we have found that you meet the necessary criteria for enrollment.

Your eligibility details are as follows:

- Service Type: [Insert Service Type]
- Start Date: [Insert Start Date]
- Account Number: [Insert Account Number]

Please note that your services will commence on the start date mentioned above. If you have any questions or need further assistance, feel free to contact our customer service team at [Insert Phone Number] or [Insert Email Address].

Thank you for choosing our services. We look forward to serving you.

Sincerely,

[Your Name]

[Your Title]

[Company Name]

[Company Address]

[City, State, Zip Code]