Telecom User Identity Authentication

Date: [Insert Date]
To Whom It May Concern,
This letter serves as confirmation of the identity of the user associated with the telecom accounlisted below:
Account Holder Name: [Insert Name]
Account Number: [Insert Account Number]
Phone Number: [Insert Phone Number]
Address: [Insert Address]
We request the authentication of the above-mentioned user's identity for the following purpose
[Insert Purpose]
For additional verification, please find attached the required identification documents.
Should you need any further information, please do not hesitate to contact us at [Insert Contact Information].
Thank you for your attention to this matter.
Sincerely,
[Your Name]
[Your Position]
[Your Company]
[Your Contact Information]