

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]

[Service Provider Name]  
[Service Provider Address]  
[City, State, Zip Code]

Subject: Letter of Confirmation for Local Number Portability (LNP)

Dear [Service Provider's Customer Service Department/Specific Recipient's Name],

I am writing to confirm the initiation of the Local Number Portability (LNP) process for my phone number, [Your Phone Number].

Please find my account details below for your reference:

- Account Name: [Your Name]
- Account Number: [Your Account Number]
- New Service Provider: [New Service Provider Name]

I request that the porting process be completed on or before [Desired Porting Date].

If you require any additional information or documentation, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].

Thank you for your assistance.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]