

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

[Recipient's Name]
[Recipient's Title/Position]
[Department/Organization Name]
[Address]
[City, State, Zip Code]

Subject: Tennessee Driver's License Verification

Dear [Recipient's Name],

I am writing to request verification of my Tennessee driver's license information. Below are the details needed for the verification process:

- Full Name: [Your Full Name]
- Date of Birth: [Your Date of Birth]
- Driver's License Number: [Your License Number]
- Address on License: [Address on License]

Please let me know if you require any further information or documentation to assist with this verification. I appreciate your prompt attention to this matter.

Thank you.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]