

Sample Demand Letter

Victims of bad checks are required to make at least one attempt to notify a check writer to demand payment of a check that is returned because of Insufficient Funds. **This must be done by Certified or Registered Mail so that the check writer's receipt of the letter can be proven in court. The check writer must then be given five (5) days from receipt of the notice to respond to the letter.** If, after that time, the matter has not been resolved, the check can be referred to the Check Enforcement Program. Checks marked Account Closed and No Account can be referred to the program without notifying the check writer.

The sample demand letter below is suitable to send the check writer. The language of the letter conforms to the requirements of the Virginia statutes.

Note: Victims of bad checks must not make any threats of prosecution - written or oral - to enforce or enhance the collection or honoring of the check.

Be sure to date the letter.

You can vary this text, but the text of a demand letter should substantially conform to this wording.

You may require your usual, posted fee amount. When you submit a check to the Check Enforcement Program, we enforce a victim's service fee of \$25 in addition to the full amount of the check.

Keep a copy of the letter for your files.

If it is returned as undeliverable, you should enclose the undelivered letter or return receipt when you submit the check to the Check Enforcement Program.

Calling the check writer:

In the event you contact the check writer by phone, you should give essentially the same information as shown in this sample letter.

Of course you are free to discuss the matter with the check writer, but remember to avoid threats of prosecution.

(Company letterhead)

Check writer _____ Date _____
Address _____
City, State Zip _____

Re: Notice of Dishonored Check

You are hereby notified that a check, number _____, issued by you on *(date of check)*, drawn upon *(name of bank)*, and payable to *(your business)*, has been dishonored.

You have five days from receipt of this notice to tender payment of the full amount of the check plus a fee of \$ _____ to the undersigned at: _____

You are further notified that in the event the above amount is timely paid in full, you will not be subject to legal proceedings, civil or criminal.

Sincerely,

(Signed)

FOR MORE INFORMATION

If you have questions about the Program or any of the bad checks you have referred, call us toll free at **1-888-410-7803** or visit the Check Enforcement Program website for more information or to download forms:

www.hotchecks.net/Orange

Commonwealth's Attorney's Check Enforcement Program

P.O. Box 310 • Orange, VA 22960