Statute Barred Debt Letter

Limitation Act 1980 · Section 5

YOUR NAME
[YOUR FULL NAME]

YOUR ADDRESS
[YOUR FULL ADDRESS, POSTCODE]

YOUR DATE OF BIRTH
[DD/MM/YYYY]

THEIR NAME / COMPANY
[CREDITOR OR DCA NAME]

THEIR ADDRESS
[THEIR FULL ADDRESS, POSTCODE]

DATE
[DATE]

REFERENCE
[ACCOUNT OR REFERENCE NUMBER]

Dear Sir or Madam,

RE: Statute Barred Debt · Reference [REFERENCE NUMBER]

I am writing about the account referenced above.

You are on notice that this debt is statute barred under the Limitation Act 1980. More than six years have elapsed since the last acknowledgement in writing or the last payment made against this account. Section 5 of the Limitation Act 1980 provides that no action shall be brought to recover a simple contract debt after this period.

I do not acknowledge any liability for this alleged debt. This letter is not an acknowledgement for the purposes of Section 29 of the Limitation Act 1980.

In line with the Financial Conduct Authority Consumer Credit sourcebook (CONC 7.15), you must not attempt to collect a statute barred debt where the consumer has stated that they will not pay it. Further contact seeking payment will be treated as unfair or improper practice and reported to the Financial Ombudsman Service and the Financial Conduct Authority.

Please confirm in writing within 14 days of the date of this letter that:

- The account has been marked as statute barred on your records.
- No further collection activity will be pursued.
- The account will not be sold, assigned or transferred to any third party.

Any response should be sent by post to the address above. I do not consent to communication by telephone.

Yours faithfully,

SIGNATURE
[SIGN HERE]

PRINT NAME

[YOUR FULL NAME]