[Sender Name]
[Sender Title/Position]
[Organization Name]
[Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

[Date]

[Recipient Name]
[Recipient Title]
[Recipient Organization]
[Address]
[City, State, Zip Code]

Subject: Verification of Volume Limitations - [Account/Contract Number]

Dear [Recipient Name],

This letter serves as formal verification regarding the volume limitations established for [Project Name/Product Type] under the agreement dated [Contract Date].

As per our internal audit and monitoring systems, we confirm that the following volume constraints have been applied:

- **Maximum Capacity/Limit:** [Specify Amount, e.g., 50,000 units/GB/Users]
- **Reporting Period:** [e.g., Monthly, Quarterly, Annually]
- **Current Usage:** [Specify Current Amount]
- **Remaining Allocation:** [Specify Amount Remaining]

We verify that [Organization Name] is in compliance with these predefined limits. Any activity exceeding these thresholds will require a formal amendment to the existing agreement or may result in [mention consequences, e.g., service suspension or overage fees].

Should you require further documentation or have questions regarding these metrics, please contact me directly at [Phone Number].

Sincerely,

[Signature]

[Typed Name]
[Title]