

# Partnership Authorization Letter

Date: [Insert Date]

[Your Name]  
[Your Position]  
[Your Company Name]  
[Your Company Address]  
[City, State, Zip]  
[Email Address]  
[Phone Number]

[Recipient Name]  
[Recipient Position]  
[Recipient Company Name]  
[Recipient Company Address]  
[City, State, Zip]

Dear [Recipient Name],

We, [Your Company Name], hereby authorize [Partner Company Name] to act on our behalf in all matters pertaining to the joint venture for [Project Name]. This partnership aims to [briefly describe the purpose of the joint venture].

We affirm our trust in [Partner Company Name] to manage all aspects of this partnership, including but not limited to [list specific responsibilities or tasks]. This authorization is valid from [start date] to [end date].

Please feel free to reach out if you have any questions or require further information.

Sincerely,

[Your Name]  
[Your Position]  
[Your Company Name]