

Product Quality Certification Authorization

Date: [Insert Date]

[Your Company Name]

[Your Company Address]

[City, State, Zip Code]

Email: [Your Email]

Phone: [Your Phone Number]

To Whom It May Concern,

This letter serves as authorization for [Authorized Person's Name], holding the position of [Position] at [Your Company Name], to represent us in matters pertaining to the quality certification of our product, [Product Name/Model].

We hereby confirm that [Authorized Person's Name] is authorized to undertake all necessary actions, including but not limited to submitting documentation and receiving information regarding the certification process.

If you have any questions or require further information, please do not hesitate to contact us using the details provided above.

Sincerely,

[Your Name]

[Your Position]

[Your Company Name]

[Company Seal if applicable]