

Authorization Letter for Transportation Service Vehicle Testing

Date: [Insert Date]

To Whom It May Concern,

I, [Your Name], the [Your Position] of [Your Company/Organization Name], hereby authorize [Recipient's Name or Company Name] to conduct vehicle testing services for the following transportation service vehicles:

- Vehicle Make and Model: [Insert Make and Model]
- Vehicle Identification Number (VIN): [Insert VIN]
- Testing Location: [Insert Location]
- Testing Date(s): [Insert Date(s)]

This authorization is effective from [Start Date] to [End Date]. Please feel free to contact me at [Your Phone Number] or [Your Email Address] should you have any questions or require further information.

Thank you for your cooperation.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Name]

[Your Position]

[Your Company/Organization Name]

[Your Company/Organization Address]