

Corporate Liability Terms Acceptance

Date: [Insert Date]

[Your Name]

[Your Position]

[Your Company Name]

[Company Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

To: [Recipient's Name]

[Recipient's Position]

[Recipient's Company Name]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally accept the terms and conditions of the Corporate Liability Agreement as discussed and outlined in our previous correspondence.

By signing below, I acknowledge that I have read, understood, and agree to the corporate liability terms provided.

[Your Name]

[Your Position]

[Your Company Name]

Thank you for your cooperation.

Sincerely,

[Your Name]