

# Consent Letter for Beneficiary Access to Policy

Date: [Insert Date]

To Whom It May Concern,

I, [Your Full Name], born on [Your Birthdate], residing at [Your Address], hereby give my consent to grant access to my insurance policy to the following beneficiary:

**Beneficiary's Name:** [Beneficiary's Full Name]

Relationship: [Relationship to You]

Contact Information: [Beneficiary's Contact Information]

This consent is specifically for accessing the following policy:

**Policy Number:** [Policy Number]

Insurance Company: [Insurance Company Name]

I understand that by granting this access, the beneficiary may obtain information pertaining to the policy, including but not limited to the policy status, benefits, and any claims.

This consent is effective as of the date signed and will remain in effect until revoked in writing.

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]

[Your Phone Number]