

Permission Letter

Date: _____

To,

Recipient Name
Recipient Address
City, State, Zip Code

Subject: Permission for Accessing Policy Details

Dear [Recipient Name],

I, [Your Full Name], residing at [Your Address], am writing to grant permission for [Beneficiary's Name] to access my policy details associated with [Policy Number/Name]. This permission is granted for the purpose of [briefly state purpose, e.g., understanding benefits, making claims, etc.].

I confirm that [Beneficiary's Name] is my [relationship, e.g., son, daughter, spouse, etc.] and I authorize them to obtain any necessary information regarding my policy.

Thank you for your assistance in this matter.

Sincerely,

[Your Signature (if sending in hard copy)]
[Your Printed Name]
[Your Contact Information]