Pharmaceutical Partnership Agreement

Date: [Insert Date]
From:
[Your Company Name]
[Your Company Address]
[City, State, Zip Code]
To:
[Partner Company's Name]
[Partner Company's Address]
[City, State, Zip Code]

Subject: Licensing Partnership Agreement

Dear [Partner's Name],

We are pleased to propose a partnership agreement between [Your Company Name] and [Partner Company's Name] for the licensing of [specific pharmaceutical product or technology]. This agreement aims to establish a mutually beneficial collaboration that leverages our combined strengths and resources.

Terms of Agreement

- **Licensing Scope:** Description of the product/technology licensed.
- **Duration:** Term of the license agreement.
- **Financial Terms:** Royalty percentages, upfront fees, and payment schedules.
- **Responsibilities:** Outline of each party's obligations.
- Confidentiality: Non-disclosure agreements regarding proprietary information.

We believe this partnership holds great potential for both organizations. We look forward to discussing this proposal further and working together to finalize the agreement.

Thank you for considering this opportunity.

Sincerely,

[Your Name]

[Your Title]

[Your Company Name]

[Your Contact Information]