

Authorization Letter for Credit Card Loan Consolidation

Date: _____

To Whom It May Concern,

I, **[Your Name]**, residing at **[Your Address]**, authorize **[Lender's Name]** to act on my behalf for the purpose of consolidating my credit card loans.

My account numbers are as follows:

- Credit Card 1: **[Account Number]**
- Credit Card 2: **[Account Number]**
- Credit Card 3: **[Account Number]**

I give my full consent to **[Lender's Name]** to obtain any necessary information and to negotiate terms on my behalf necessary for the consolidation of my credit card debts.

Please feel free to contact me at **[Your Phone Number]** or **[Your Email Address]** for any additional information or verification.

Thank you for your attention to this matter.

Sincerely,

[Your Signature]

[Your Printed Name]