

Approval for Debt Recovery Action

Date: [Insert Date]

To: [Agent's Name]
[Agent's Company]
[Agent's Address]
[City, State, Zip Code]

Dear [Agent's Name],

We hereby approve your request to proceed with the necessary actions for debt recovery regarding the account of [Debtor's Name] with account number [Account Number]. The outstanding amount is [Amount Due].

As discussed, we authorize you to take appropriate measures in accordance with the law to recover the owed funds. Please ensure that all communications remain professional and compliant with applicable regulations.

Should you need any further documentation or support from our end, do not hesitate to contact us.

Thank you for your attention to this matter.

Sincerely,

[Your Name]
[Your Position]
[Your Company]
[Company Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]