

Debt Recovery Agent Authorization Notice

Date: [Insert Date]

To Whom It May Concern,

This letter serves as a formal authorization for [Agent's Name], representing [Agency Name], to act on my behalf in the matter of debt recovery for the account of [Your Name/Company Name] with account number [Account Number].

Authorized Agent Details:

- Name: [Agent's Name]
- Agency: [Agency Name]
- Contact Number: [Agent's Contact Number]
- Email Address: [Agent's Email Address]

I provide this authorization effective immediately and grant the right to negotiate, settle, and take any necessary actions to recover the outstanding debt.

Should you have any questions or require further information, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].

Sincerely,

[Your Name]

[Your Address]

[Your City, State, ZIP]