

Authorization Letter

Date: [Insert Date]

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

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

Dear [Broker's Name],

This letter serves as formal authorization for [Broker's Company Name] to act on behalf of [Your Company Name] in securing business insurance coverage. This authorization includes, but is not limited to, obtaining quotes, discussing terms and conditions, and finalizing policies.

We grant [Broker's Company Name] full authority to represent our interests in all matters pertaining to our insurance needs. This authorization will remain in effect until revoked in writing by [Your Company Name].

If you have any questions, please feel free to contact me directly at [Your Phone Number] or [Your Email Address].

Thank you for your attention to this matter.

Sincerely,
[Your Name]
[Your Position]
[Your Company Name]