

# Auto Insurance Claim Authorization Letter

Date:

To:

Insurance Company Name:

Address:

Subject: Authorization for Auto Insurance Claim

Dear Sir/Madam,

I, \_\_\_\_\_, hereby authorize \_\_\_\_\_ to act on my behalf regarding the insurance claim for my vehicle, described as follows:

Policy Number:

Vehicle Make/Model:

Registration Number:

Claim Number:

I grant permission to handle all correspondence, submit documents, obtain claim status updates, and undertake any actions necessary to process my claim.

Kindly consider this letter as formal authorization for the aforementioned person to represent me in all matters relating to my claim.

Sincerely,

Authorized Person's Name:

Signature:

Date:

Contact Number: