

To:

The Manager
[Bank Name] Branch
[Bank Address]

Date: [DD/MM/YYYY]

Payment Authorization Letter

From:

[Your Full Name]
[Your Address]
Account Number: [XXXXXXXXXXXX]

Dear Sir/Madam,

I, **[Your Full Name]**, holder of account number **[XXXXXXXXXXXX]** at your branch, hereby authorize **[Authorized Person's Full Name]** to act on my behalf for the purpose of making payments and settling dues related to my above-mentioned account.

Please find the details of the authorized person below:

- Full Name: [Authorized Person's Full Name]
- Identification Number: [ID/Passport Number]
- Contact Number: [Contact Number]

This authorization is valid from **[Start Date]** to **[End Date]**, unless revoked in writing before the expiry date.

Kindly provide the necessary assistance to the above-named person to facilitate the payment process as per my request.

Thank you for your cooperation.

Sincerely,

[Your Full Name]
[Your Contact Number]

Important Notes:

- Ensure all personal and authorized person's information is accurate and up to date.
- Specify clear validity period and purpose for the authorization.
- This letter should be signed by the account holder and accompanied by valid ID copies if required.
- Check if your bank requires a specific template or notarization.
- Always keep a copy of this letter for your own records.