

Payment Authorization Letter

[Your Company Letterhead]

[Company Name]

[Company Address]

[City, State, ZIP Code]

[Phone Number]

[Email Address]

Date: [DD/MM/YYYY]

Subject: Authorization to Make Payments from Business Account

To,

[Bank Name / Financial Institution Name]

[Branch Address]

[City, State, ZIP Code]

Dear Sir/Madam,

I, **[Authorized Person's Name]**, in my capacity as **[Designation]** of **[Company Name]**, hereby authorize **[Name of the Person Being Authorized]**, holding identification number **[ID/Employee No.]**, to make payments and complete related transactions on behalf of our business for the following account:

Account Name: [Business Account Name]

Account Number: [XXXXXXXXXXXX]

Bank Name: [Bank Name]

The authority granted includes but is not limited to payment processing, issuance of cheques, online transfers, standing instructions, and any transactional activities necessary for routine business operations.

This authorization shall remain valid until [end date or "further notice in writing"]. If you require any clarification or further information, please contact me at [phone/email].

Sincerely,

[Authorized Signatory Name]

[Designation]

[Company Name]
[Official Stamp/Seal]

Important Notes:

- Ensure the letter is printed on your official company letterhead.
- Include all necessary account and authorized person details clearly.
- Attach supporting identification documents, if required by the bank.
- Specify the validity period of the authorization, if applicable.
- The letter must be signed by authorized signatories and stamped if applicable.