

[Date]

[Recipient Name]

[Recipient Title/Position]

[Company/Organization Name]

[Address Line 1]

[Address Line 2]

**Subject: Periodic Independence Reaffirmation Letter**

Dear [Recipient Name],

This letter is to formally reaffirm my independence as required by [relevant standards/laws, e.g., the Code of Professional Conduct or Internal Policies]. I confirm that for the period ending [date/period], I have maintained my independence in both fact and appearance while delivering services to [client/organization name].

I further confirm that I have complied with all applicable independence requirements and have not participated in any activities or relationships that would impair or be perceived to impair my objectivity and independence.

Should any situation arise that might reasonably be regarded as a threat to my independence, I will promptly notify the appropriate parties as per the established policies.

Please let me know if any further information or clarification is required.

Sincerely,

[Your Name]

[Your Title/Position]

[Contact Information]

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**Important Notes:**

- This letter is typically required periodically for compliance and audit purposes.
- Ensure all information is accurate and reflects current circumstances before signing.
- Customize the sections in brackets [ ] for your specific situation and organization.
- Retain a signed copy for your records and submit according to your organization's procedures.