

Name & Address

Provider

Date / /

Dear Sirs

Policy Number (s):

Please take this letter as written confirmation that we authorise you to make readily available all policy specific information as may be requested to the IFA listed below:-

Bebbington Brumby Townend Group Limited
Crawford House
96A Barnsley Road
Sandal
Wakefield
WF1 5NP

Yours faithfully,

Signed _____
Client 1

Date _____

Signed _____
Client 2

Date _____