

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

[Consulate/Embassy Name]
[Consulate/Embassy Address]
[City, State, Zip Code]

Subject: Authorization Letter for LZ Visa Application

Dear Sir/Madam,

I, [Your Full Name], born on [Date of Birth], holding the passport number [Passport Number], hereby authorize [Authorized Person's Full Name], who is my [Relationship to You], to act on my behalf in submitting and collecting my LZ visa application and related documents from [Name of the Consulate/Embassy].

[Authorized Person's Full Name] will present their identification, and I grant them full authority to make any necessary inquiries regarding my visa application.

Thank you for your assistance in this matter.

Sincerely,

[Your Signature]
[Your Printed Name]