

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

[Recipient Name]
[Recipient Address]
[City, State, Zip Code]

Subject: Authorized Party Agreement

Dear [Recipient Name],

This Authorized Party Agreement ("Agreement") is made and entered into as of [Effective Date], by and between [Your Name/Company Name] ("Principal") and [Authorized Party Name] ("Authorized Party").

1. ****Authorization****

The Principal hereby authorizes the Authorized Party to act on behalf of the Principal in matters related to [specific matters or areas of authority].

2. ****Duration****

This Agreement shall commence on the Effective Date and shall continue until [end date or condition for termination], unless earlier terminated by either party with [number of days] notice.

3. ****Responsibilities****

The Authorized Party agrees to [list specific responsibilities and obligations].

4. ****Limitations****

The Authorized Party is not authorized to [list any limitations on the authority granted].

5. ****Indemnification****

The Authorized Party agrees to indemnify and hold harmless the Principal from any claims or liabilities arising from the Authorized Party's actions under this Agreement.

6. ****Governing Law****

This Agreement shall be governed by the laws of the State of [State]. Please sign below to indicate your acceptance of the terms of this Agreement.

Sincerely,

[Your Signature]

[Your Printed Name]

Accepted and Agreed:

[Authorized Party Signature]

[Authorized Party Printed Name]

[Date]