

LETTER OF AUTHORITY

I/We, the undersigned,

[COMPANY NAME/INSURED & NAME OF REPRESENTATIVE OF COMPANY/INSURED]

hereby give permission for Halcyon Short Term Brokers to obtain short term commercial quotes on my/our behalf as well as obtain copies of all policies and claims history in respect of my/our policies held at various insurance companies.

Company Reg No _____

Policy Number's _____

Name of insurer/s _____

Contact No's _____

Email Address _____

Signature of Insured

Date Signed



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