[TYPE HERE COMPANY NAME OR COMPANY LETTERHEAD]
[TYPE HERE COMPANY ADDRESS]
[TYPE HERE CONTACT NO., EMAIL]

Authorization Letter

[DATE]

We herewith authorize

[Type here the authorized company]
[Type here the address]

As our agent to promote, negotiate, tender, sell, exhibit and responsible for all the after-sale service on behalf of our [TYPE HERE COMPANY NAME] in the whole territory of [type here the country] for sale of our products [NAME OF PRODUCTS example, digital thermometer, nasal cannula, nebulizer kit, elastic bandage].

This Certification commences on the date of signing and is valid for {NO. OF YEARS} year from [START DATE] to [END DATE].

This Certification will become null and void unless it is agreed between both parties to mark an extension.

Yours faithfully,

[NAME OF AUTHORIZED SIGNATORY]
[POSITION OR DESIGNATIION]
[COMPANY NAME]