

## LETTER OF AUTHORISATION

To whom it may concern,

This serves to confirm that I/we have requested ACM Ahlers Insurances Limited to examine my/our current insurance programme and to prepare a report and obtain quotations on my/our behalf.

I/We would be obliged if you would release to them all details relating to my/our insurance and render to them any additional assistance that they may require.

I/We authorise the disclosure of all information held by any party regarding my/our previous insurance.

I/We agree to ACM Ahlers releasing to other parties all information regarding my/our insurance.

ACM Ahlers is a trading entity of ACM Insurances Ltd.

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

This Letter of Authorisation is on behalf of:

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