

(on your letter headed paper)

Date: _____

Dear Sir/Madam,

Insured Name - _____

Please note that with immediate effect, I hereby authorise Bennett Gould & Partners Ltd, 18 Ley Court Barnett Way Barnwood Gloucester GL4 3RT (FCA 306850) to carry out a review of my motor policy below.

Policy No

Insurer

Please supply BGP Ltd with my claims experience and any other information that they may request as soon as possible.

Yours faithfully,

Signed: _____

Name: _____

Position: _____