

**Date:** [Insert Date]

**To:** [Insert Bank Name]  
[Insert Bank Address]  
[Insert City, State, Zip Code]

**Subject: Letter of Authorization for Partnership Account Opening**

To Whom It May Concern,

We, the undersigned, being all the partners of **[Insert General Partnership Name]** (the "Partnership"), a general partnership organized and existing under the laws of [Insert State/Province], do hereby certify and agree to the following:

1. That the Partnership has decided to open a business banking account with [Insert Bank Name].
2. That **[Insert Name of Authorized Partner]** and **[Insert Name of Authorized Partner]** (the "Authorized Representatives") are hereby authorized to:
  - Open, maintain, and close bank accounts on behalf of the Partnership.
  - Execute any and all documents required by the Bank for the opening and operation of said accounts.
  - Deposit, withdraw, transfer, and manage funds within the accounts.
  - Sign checks, drafts, or other orders for the payment of money.
3. This authorization shall remain in full force and effect until the Bank receives written notice of its revocation or amendment signed by the partners.

**Signatures of All General Partners:**

\_\_\_\_\_  
[Print Name]:  
[Date]:

\_\_\_\_\_  
[Print Name]:  
[Date]:

\_\_\_\_\_  
[Print Name]:  
[Date]:

**Partnership Tax ID (EIN):** [Insert EIN]

**Business Address:** [Insert Business Address]