

Date: [Insert Date]

To: [Insert Applicant Name]

[Insert Business Name]

[Insert Address Line 1]

[Insert Address Line 2]

Subject: Clarification Required Regarding Authorized Signatory Application

Dear [Insert Name],

Thank you for your recent application to add an authorized signatory to the business account for [Insert Business Name], ending in [Insert Last 4 Digits of Account Number].

After reviewing the documentation provided, we are unable to process your request at this time. To proceed with the application, we require further clarification or additional information regarding the following:

- [Insert Reason 1: e.g., Missing valid government-issued identification]
- [Insert Reason 2: e.g., Incomplete signature card or application form]
- [Insert Reason 3: e.g., Lack of board resolution or meeting minutes authorizing this change]

Please provide the requested documents or information by [Insert Deadline Date] to ensure the continued processing of your request. You may submit these via [Insert Submission Method: e.g., secure online portal, in-person at a branch, or mail].

If you have any questions regarding this requirement, please contact our business banking team at [Insert Phone Number] or [Insert Email Address].

Sincerely,

[Insert Your Name/Department]

[Insert Job Title]

[Insert Financial Institution Name]