

[Company Letterhead]

[Date]

[Name of Regulatory Authority]

[Department/Division]

[Street Address]

[City, State, Zip Code]

RE: Submission of Business Continuity Plan (BCP) for [Vendor Name]

To [Name of Contact Person or "Whom It May Concern"],

In accordance with [Reference Specific Regulation or Policy Name], [Your Company Name] is hereby submitting the Business Continuity Plan (BCP) for our critical vendor, [Vendor Name].

As part of our third-party risk management oversight, we have reviewed the attached BCP to ensure that [Vendor Name] maintains adequate procedures for the recovery of essential services in the event of a significant business disruption. This submission includes:

- Executive Summary of the Vendor BCP
- Risk Assessment and Impact Analysis
- Recovery Time Objectives (RTO) and Recovery Point Objectives (RPO)
- Latest BCP Test Results and Validation Date

We confirm that this plan aligns with our internal resiliency requirements and the regulatory standards mandated by [Name of Regulatory Body].

Should you require any additional information or have questions regarding this submission, please contact [Point of Contact Name] at [Phone Number] or [Email Address].

Sincerely,

[Signature]

[Full Name]

[Job Title]

[Your Company Name]