

Business Name/Letterhead
Address Line 1, Address Line 2
Contact: _____

Date: _____

To,
The Manager
[Insurance Company Name]
[Branch/Office Address]

Subject: No Objection Certificate (NOC) for Third Party Liability Insurance

Dear Sir/Madam,

This is to certify that we, **[Business Name]**, having our registered office at **[Address]**, have no objection with respect to obtaining a Third Party Liability Insurance policy for the purpose of _____ by **[Name of Applicant/Concerned Party]**.

We confirm that we have reviewed the terms of insurance and acknowledge the need for such coverage. This NOC is being issued upon the request of the applicant and is intended to facilitate the processing of their third party liability insurance.

Please feel free to contact us for any further clarification or information.

Thank you.

Authorized Signatory

Name: _____
Designation: _____
Company Seal