[Date]

[Name of Recipient]
[Title]
[Company Name]
[Company Address]

Subject: Key Person Risk Assessment and Coverage Recommendation

Dear [Recipient Name],

Following our recent evaluation of [Company Name]'s operational structure, I am submitting this formal assessment regarding "Key Person" risk and our recommendations for financial protection.

1. Risk Identification
We have identified the following individual(s) as essential to the continued profitability and stability of the organization:
- [Name of Key Person], [Title]
- [Name of Key Person], [Title]

2. Impact Assessment
The loss of the aforementioned individual(s) due to death or extended disability would likely result in:
- Interruption of specialized technical expertise or intellectual property.
- Loss of key client relationships and revenue streams.
- High costs associated with executive recruitment and training.
- Potential instability regarding outstanding business loans or credit lines.

3. Coverage Recommendation
To mitigate these risks, we recommend the implementation of a Key Person Insurance policy with the following specifications:
- **Proposed Benefit Amount:** $[Amount]
- **Policy Type:** [Term Life / Whole Life / Disability Outlay]
- **Owner & Beneficiary:** [Company Name]

4. Next Steps
This coverage will provide the necessary liquidity to sustain operations and fund a professional search for a successor. We recommend a formal review of the underwriting requirements and a premium allocation in the next fiscal budget.

Please let us know how you wish to proceed with the application process.

Sincerely,

[Your Name]
[Your Title]
[Contact Information]