Sample Emergency Guidance Letter

Use this file as a template to complete your Emergency Guidance Letter. Once completed, be sure to alert your spouse and/or most trusted employee(s) as to the existence and location of this letter.

| Effective Date: |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Dear (Business Employee/Partner): |
| This letter is meant to assist you in dealing with important business matters should something have happened to me that prevents me from working with you directly at this time. |
| (Add any further personal statements that you may wish.) |
| |

Advisors:

Some of the people you may need to contact to assist you at this time are:

| Advisor Role | Name | Firm | Telephone | Email | Address |
|----------------------------|------|------|-----------|-------|---------|
| Attorney | | | | | |
| Accountant | | | | | |
| Bank | | | | | |
| Business | | | | | |
| Financial | | | | | |
| Insurance – Life/Health | | | | | |
| Insurance – Property | | | | | |
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| I have made the following plans for the eventual handling of my ownership interest in the business |
|---------------------------------------------------------------------------------------------------------------------------------|
| In the event that I have died, or that I am seriously disabled such that I am unable to communicate with |
| you and unlikely to recover anytime soon, my further wishes for the business are: |
| I suggest that the following steps should be considered in the short term during this important business transition: |
| Key employees to meet with / any special concerns to address: |
| Key customers to meet with / any special concerns to address: |
| Key external partners (lenders, suppliers, etc.) to meet with / any special concerns to address: |
| |
| Important documents or information that you may need to access and not be familiar with already: |
| If I have died or may not recover from my disability, I would like to be remembered by the company and team the following ways: |
| |

| Print Name | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| Signature | |
| This document is not intended to replace my will or ot by me. However, it is my express desire that business discretionary decisions for the business going forward | team will use this letter in making any |
| (Your Name) | |
| Sincerely, | |
| | |
| What has been most important to me about this comp | pany is It is my hope that you will |

WHAT IS NAVIX®?

NAVIX® is a proprietary process that helps business owners plan for and achieve successful exits.

NAVIX® helps owners of closely held businesses plan for and execute successful exits: achieving financial freedom, creating a sustainable legacy, and exiting on their own terms.

NAVIX® was designed out of experience seeing business owners struggle to achieve financial freedom, create a sustainable business legacy, and exit on their own terms. NAVIX® is a dual track process, that prepares both the business and its owner(s) for exit. NAVIX® is not just about planning; we also help clients execute the strategies and tactics needed to achieve a successful exit.

To review your score with someone from the NAVIX® team, or to learn about the NAVIX® program, please visit www.navixconsultants.com.