



Customer Authorization for Vehicle Registration and Insurance Transactions

Customer Number: _____

Driver's Licence Number: _____

I, _____ hereby authorize _____
 (Print your Name) (Print **Name** and Contact **Telephone Number**)

To complete the following transaction(s) on my/our behalf on the following vehicle(s):

 (Licence Plate Number, Year, Make & Model of Vehicle)

Vehicle Transaction: (select all that apply)

- Renewal/Reactivation/Reapplication
- New Application
- Mid-Term Change
- Cancellation

Policy Coverage:	Deductible:	Third Party Liability:		Extension Loss of Use
All Purpose	\$500 (basic)	\$200,000 (basic)	\$5,000,000	Level 1
Pleasure	\$300	\$1,000,000	\$7,000,000	Level 2
Other	\$200	\$2,000,000	\$10,000,000	Declined
	\$100			

Excess Value over \$50,000: _____

Declared Value (if applicable): _____

Payment Options:

- Full Payment
- 4 Time Payments
- 12 Pre-Authorized Payments (Sample cheque or credit card information required)

Off-Road Vehicle Options:

- Accident Benefits
- Collision Coverage
 - \$500 Deductible
 - \$200 Deductible
- Comprehensive Coverage
 - \$500 Deductible
 - \$200 Deductible

Motorcycle Options:

- Collision Coverage
 - \$500 Deductible
 - \$200 Deductible
- Comprehensive Coverage
 - \$500 Deductible
 - \$200 Deductible

Other Options:

- I require No Changes
- Please cancel my insurance on: _____
- Please amend the following with storage insurance. _____

Lay up/Storage:

Effective Date: _____ Address where vehicle is stored: _____

Cancellation:

Effective Date: _____ Storage Insurance Declined (Initials): _____

Plates Surrendered: _____ YES _____ NO

X _____ X _____ _____
 Registered Owner's Signature Authorized Person's Signature Date