Request for communication of computerized personal information

Request to:			
Name (last name, first name):			
Address:			
Phone number:			
_			
I am	☐ The person concerned		
		The attorney	of the person concerned
		Other (spec	ify):
Purpose	pose Communication of computerized personal information to the person concerned		
		Communica	tion of computerized personal information to a third party
Displacture of computarized personal information to the person concerned			
Disclosure of computerized personal information to the person concerned			
Personal information collected from you in a computerized format, a copy of which you wish to obtain:			
☐ Information related to your current car insurance policy			
☐ Information related to your current home insurance policy			
☐ Information related to your current recreational of leisure vehicle insurance policy			
Other:			
Reasons			
Briefly describe why you would like to receive this personal information.			
Contact information			
I would like to receive this personal information at the following email address:			



^{*}Attach relevant documents (attach another sheet if needed).

Disclosure of computerized personal information to a third party Personal information collected from you in a computerized format, which you wish to disclose to a third party: ☐ Information related to your current car insurance policy ☐ Information related to your current home insurance policy ☐ Information related to your current recreational of leisure vehicle insurance policy □ Other: Reasons Briefly describe why you would like to receive this personal information. **Contact information** I would like to forward this personal information to: Organization (if applicable): Recipient's name: Recipient's email address: *Attach relevant documents (attach another sheet if needed). Certification ☐ I certify that the information I have provided is accurate and I understand that my personal information will be forwarded to the email address provided if my request is approved.

For more information on the personal information that may be the subject of this request, please visit our website at www.promutuelassurance.ca.

Signature

Date

