

CONSENT FOR THE COLLECTION AND COMMUNICATION OF PERSONAL INFORMATION WHEN MAKING A CLAIM

Granted pursuant to the Act respecting the protection of personal information in the private sector

Your firm's name/logo

LOSS INFORMATION

File No. _____

Insurance Policy No. _____

Date of Loss _____

Insurer (henceforth referred to as the Insurer) _____

OBJECT OF CONSENT

The Insurer has received a claim for the above-mentioned loss.

The Insurer will therefore create a file in which it will record the information necessary to process this claim.

During the course of investigating and processing this claim, the Insurer, through its mandataries—in particular the claims adjuster assigned to this claim—will be required to collect personal information from third parties as well as communicate this information to other persons, where applicable.

Only information necessary for the purposes of investigating and processing this claim will be collected and communicated; such information will be used solely for these purposes.

CONSENT TO THE COLLECTION AND COMMUNICATION OF PERSONAL INFORMATION

I, _____, authorise the Insurer and its mandataries to:

IN BLOCK LETTERS

1. **Collect from a third party**, in other words those persons, enterprises and organizations checked below, all personal information concerning me that the Insurer and its mandataries require to complete their investigation and process my claim.
2. **Communicate to a third party**, in other words those persons, enterprises and organizations checked below, all personal information concerning me that is contained in the file identified under "object of consent" or which may be collected in the course of investigating this claim.

I authorise collection from		I authorise communication with		Persons, enterprises and organizations	Examples of personal information sought
Yes	No	Yes	No		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insurance companies	Claims history and the insured's insurance file
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insurance firms or claims adjustment firms	Claims history and any communication with claims adjusters who acted in these claims
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Financial institutions and credit unions	Financial situation of the insured and credit history
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal information officers and credit rating organizations	Credit history and existence of debts or mortgage loans
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GAA data base	Claims history
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire department - Report No.:	Fire report and any communication with firefighters, where applicable
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Police department - Report No.:	Incident report and any communication with police officers, where applicable
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Municipal, civil and governmental authorities	Incident report and any communication with public security authorities, where applicable
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Estimators, assessors, architects and engineers	Plans, quotes, evaluations and evaluation reports
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Suppliers of goods and/or services	Invoice; proof of purchase, maintenance or repair; proof of debt; rental contract and record of use
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Employers and former employers	Ownership of property for professional use
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Relatives, friends, neighbours and acquaintances	Statements concerning the circumstances of the loss or concerning the insured's habits
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any other person, enterprise or organization likely to provide the Insurer with information that will help in analysing the claim, namely:: _____ _____	

This consent is given solely for the purposes of investigating and processing the claim presented and only for the time required to do so.

Form issued by:

Signature of the Insured / Claimant _____

Date _____



NOTICE OF CONSTITUTION OF THE FILE, RIGHTS TO ACCESS AND RECTIFICATION OF THE FILE

- Any personal information obtained pursuant to this consent will be recorded in a damage insurance file and only the Insurer's employees, its mandataries and persons authorized under the Act will have access to the file when necessary to the performance of their duties and for authorized purposes only.
- The file thus constituted will be kept at the following address:

- A request for access to personal information contained in this file may be made by sending a written request to do so to the above-mentioned address. This request will be processed within 30 days of its reception and in accordance with the relevant provisions of the *Act respecting the protection of personal information in the private sector* and the *Civil Code of Quebec*.
- The same procedure applies to a request for the rectification of incorrect, incomplete or ambiguous personal information contained in the file. This request will also be processed within 30 days of its reception and in accordance with the relevant provisions of the *Act respecting the protection of personal information in the private sector* and the *Civil Code of Quebec*.

Excerpts from the *Act respecting the protection of personal information in the private sector*

Collection of personal information.

4. Any person carrying on an enterprise who may, for a serious and legitimate reason, establish a file on another person must, when establishing the file, enter its object.

Entry.

The entry is part of the file.

Necessary information.

5. Any person collecting personal information to establish a file on another person or to record personal information in such a file may collect only the information necessary for the object of the file.

6. Any person collecting personal information relating to another person may collect such information only from the person concerned, unless the latter consents to collection from third persons.

Source of information.

8. A person who collects personal information from the person concerned must, when establishing a file on that person, inform him

- (1) of the object of the file;
- (2) of the use which will be made of the information and the categories of persons who will have access to it within the enterprise;
- (3) of the place where the file will be kept and of the rights of access and rectification.

Consent.

13. No person may communicate to a third person the personal information contained in a file he holds on another person, or use it for purposes not relevant to the object of the file, unless the person concerned consents thereto or such communication or use is provided for by this Act.

Validity of consent.

14. Consent to the collection, communication or use of personal information must be manifest, free, and enlightened, and must be given for specific purposes. Such consent is valid only for the length of time needed to achieve the purposes for which it was requested.

Validity of consent.

Consent given otherwise than in accordance with the first paragraph is without effect.

Initials: _____

Your firm's name/logo

Form issued by:

