

Notice to the applicant

This form must be sent together with the Driving Record Search form (4941A). Information entered on this form must not have been modified, crossed out or erased, or the application may be refused. Consult the fees required for each record.

To help us better process your application, please complete this form on-screen before printing.

INFORMATION ON THE APPLICANT
Company, agency or other (print)
Last name and first name of the person authorized to act on behalf of the applicant (print)
Address (Number, street, apt.)
Municipality/Province Postal code Telephone Ext.

AUTHORIZATION OF THE LICENCE HOLDER
Driver's licence number
Last name and first name of driver's licence holder
Date of birth Telephone (home) Telephone (work)
I, the undersigned, authorize the Société de l'assurance automobile du Québec to disclose the content of my driving record...
Year-Month-Day
Date Signature of licence holder

Protection of Personal Information
All information gathered by authorized Société de l'assurance automobile du Québec personnel is handled confidentially. The Société requires this personal information to apply the Automobile Insurance Act and the Highway Safety Code. Under the Act respecting Access to documents held by public bodies and the Protection of personal information, it may be conveyed to Government departments or agencies, or used for statistical, survey, study, audit or investigative purposes. Failure to provide information can result in a refusal of service on the Société's part. Individuals may consult or correct any personal information concerning them held in Société records.
For more information, consult the Policy on Privacy on the Société's Web site at saaq.gouv.qc.ca or contact the Société's call centre.

- For any information, call 418 528-3183 toll-free 1 866 642-1865
All applications must be sent to: Division de la diffusion (act. 850) Société de l'assurance automobile du Québec 333, boulevard Jean-Lesage Case postale 19600, succursale Terminus Québec (Québec) G1K 8J6