

Notice to the applicant

- When more than one request is to be forwarded to the SAAQ, they must be sent together with the form entitled *Driving record search* (4941A). **A fee of \$10.50 is required per file.**
- Each application must be forwarded to the following department: Service de la diffusion et de la liaison avec les corps policiers at this address: 333, boulevard Jean-Lesage C-3-44, Case postale 19600 succ. Terminus, Québec (Québec) G1K 8J6.
- For more information, please contact the following department: Service de la diffusion et de la liaison avec les corps policiers at the following telephone number: 418 528-3183.

INFORMATION ON THE APPLICANT			
Company, agency or other (in block letters)			
Name of the authorized person (in block letters)			
Address (Number, street, apt.)			
Municipality / Province	Postal code	Area code Telephone	Extension

LICENCE HOLDER'S AUTHORIZATION																				
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc; text-align: center; padding: 2px;">Driver's licence number</th> </tr> <tr> <td style="border: 1px solid black; height: 20px; width: 100%;"></td> </tr> </table> <p style="font-size: small; margin-top: 5px;">Enter 13 characters.</p>			Driver's licence number																	
Driver's licence number																				
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc; text-align: center; padding: 2px;">Name of the driver's licence holder</th> </tr> <tr> <td style="border: 1px solid black; height: 20px; width: 100%;"></td> </tr> </table>			Name of the driver's licence holder																	
Name of the driver's licence holder																				
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc; text-align: center; padding: 2px;">Date of birth</th> </tr> <tr> <td style="border: 1px solid black; padding: 2px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="font-size: x-small; text-align: center;">Year</th> <th style="font-size: x-small; text-align: center;">Month</th> <th style="font-size: x-small; text-align: center;">Day</th> </tr> <tr> <td style="width: 33%; height: 20px;"></td> <td style="width: 33%; height: 20px;"></td> <td style="width: 33%; height: 20px;"></td> </tr> </table> </td> </tr> </table>	Date of birth	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="font-size: x-small; text-align: center;">Year</th> <th style="font-size: x-small; text-align: center;">Month</th> <th style="font-size: x-small; text-align: center;">Day</th> </tr> <tr> <td style="width: 33%; height: 20px;"></td> <td style="width: 33%; height: 20px;"></td> <td style="width: 33%; height: 20px;"></td> </tr> </table>	Year	Month	Day				<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc; text-align: center; padding: 2px;">Telephone (home)</th> </tr> <tr> <td style="border: 1px solid black; padding: 2px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="font-size: x-small; text-align: center;">Area code</th> </tr> <tr> <td style="width: 100%; height: 20px;"></td> </tr> </table> </td> </tr> </table>	Telephone (home)	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="font-size: x-small; text-align: center;">Area code</th> </tr> <tr> <td style="width: 100%; height: 20px;"></td> </tr> </table>	Area code		<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc; text-align: center; padding: 2px;">Telephone (work)</th> </tr> <tr> <td style="border: 1px solid black; padding: 2px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="font-size: x-small; text-align: center;">Area code</th> <th style="font-size: x-small; text-align: center;">Extension</th> </tr> <tr> <td style="width: 60%; height: 20px;"></td> <td style="width: 40%; height: 20px;"></td> </tr> </table> </td> </tr> </table>	Telephone (work)	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="font-size: x-small; text-align: center;">Area code</th> <th style="font-size: x-small; text-align: center;">Extension</th> </tr> <tr> <td style="width: 60%; height: 20px;"></td> <td style="width: 40%; height: 20px;"></td> </tr> </table>	Area code	Extension		
Date of birth																				
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="font-size: x-small; text-align: center;">Year</th> <th style="font-size: x-small; text-align: center;">Month</th> <th style="font-size: x-small; text-align: center;">Day</th> </tr> <tr> <td style="width: 33%; height: 20px;"></td> <td style="width: 33%; height: 20px;"></td> <td style="width: 33%; height: 20px;"></td> </tr> </table>	Year	Month	Day																	
Year	Month	Day																		
Telephone (home)																				
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="font-size: x-small; text-align: center;">Area code</th> </tr> <tr> <td style="width: 100%; height: 20px;"></td> </tr> </table>	Area code																			
Area code																				
Telephone (work)																				
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="font-size: x-small; text-align: center;">Area code</th> <th style="font-size: x-small; text-align: center;">Extension</th> </tr> <tr> <td style="width: 60%; height: 20px;"></td> <td style="width: 40%; height: 20px;"></td> </tr> </table>	Area code	Extension																		
Area code	Extension																			
<p>I, the undersigned, authorize de Société de l'assurance automobile du Québec to disclose the content of my driving record, including in particular suspensions, revocations, demerit points and heavy vehicle driving-related offences or accidents in which I was involved, if any, to the above-named applicant. This consent is valid for twelve (12) months from the date of signature.</p>																				
<p style="text-align: center; color: #808080;">Year-Month-Day</p>																				
<hr style="width: 80%; margin: 0 auto;"/> <p>Date</p>	<hr style="width: 80%; margin: 0 auto;"/> <p>Licence holder's signature</p>																			

Protection of Personal Information

All information gathered by authorized SAAQ personnel is handled confidentially. The SAAQ needs such 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 SAAQ's part. Individuals may consult or correct any personal information concerning them held in SAAQ records. For more information, contact the SAAQ's call centres or consult the Policy on Privacy on the SAAQ website at www.saaq.gouv.qc.ca.