



Prairie Villa Insurance Ltd.

#202, 9917 - 116 AVENUE, GRANDE PRAIRIE, ALBERTA T8V 3Y3

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PERMISSION TO PULL DRIVERS ABSTRACT

Insurer: .

Policy Number:

Broker: Prairie Villa Insurance Ltd.

Name of Policyholder: .

I hereby give my employer and/or Prairie Villa Insurance and the Insurance Company the authority to obtain a copy of my driver's abstract from Alberta Registries.

Name of Driver: _____

License No.: _____

Birth Date: _____

Signature: _____

Date Signed: _____