



Box 1930, Fairview, Alberta, T0H 1L0

780-835-5451 or toll free 1-800-362-1350

Fax: 780-835-4422

PERMISSION TO PULL DRIVERS ABSTRACT

I hereby authorize the Motor Vehicles Division to disclose all details of my driving record, including accidents, convictions and suspensions to R & R Insurance Ltd. and to the following insurance company_____.

Name: _____

Address: _____

Drivers Licence Number: _____

Date of Birth: _____

Name of Policy Holder: _____

Policy Number: _____

(Signature)

(Date)