



Your Best Insurance
Is An Insurance Broker.

PERSONAL INFORMATION PROPERTY/CASUALTY AND OTHER CONSENT

As part of my application for insurance, I hereby consent to the brokerage firm named below (the "Broker") collecting, using and disclosing personal information required for purposes of considering my application for new or renewal property/casualty and/or automobile and/or other insurance & financial services.

The Broker is authorized to use this information to procure terms for property/casualty and/
or automobile and/or other insurance and financial services.

The Broker is authorized to collect, use, and disclose personal information and provide such personal information to third parties, as required, including insurance companies. The Broker may also be required or permitted to disclosure such personal information pursuant to relevant privacy laws or other laws.

If I wish to review personal information pertaining to my application or policy maintained by the Broker, obtain copies of the Broker's privacy policies or standards, or make other enquiries or express concerns, I understand that I may do so by contacting the Broker's Privacy Officer.

I agree that all personal information that I provide to the Broker will be complete and accurate.

Full Name:

(Please Print)

Signature:

Date:

Name of
Brokerage:

CAIN INSURANCE SERVICES LTD

Brokerage's
Privacy
Officer:

LUKE CAIN

This form may only be used or reproduced by any active member of the Insurance Brokers Association of New Brunswick.