LETTER OF AUTHORIZATION

Drivers License #	
I,(Insured's Name)	, do hereby give
(Designated Signar)	Permission to sign on my behalf in the renewal of
(Designated Signer)	
my Drivers License.	
My Permanent Address is:	
Date:	
Signature: X	

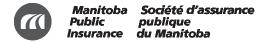


Manitoba Société d'assurance Public publique Insurance du Manitoba

DRIVER'S LICENCE QUESTIONNAIRE

Answer 'Yes' or 'No' to the following questions. Caution: It is a punishable offence to knowingly make a false answer to any question. Are you now prohibited by court from driving or is your driver's licence or right to obtain a driver's licence currently suspended or cancelled? 2 When driving do you require corrective lenses (glasses or contacts)? 3 Have you ever had any of the following conditions which have not previously been reported to Manitoba Public Insurance: a) Seizures or blackouts? b) b) Lung or heart trouble, eye diseases, stroke, diabetes treated with oral medication or injectable insulin, mental disorder, dementia or permanent limitation of motion? c) Any other medical condition or physical disability that may affect your safe operation of a motor vehicle? c) If 'Yes' to a), b) or c) the date and details of the condition(s) must be provided below. 4 Do you hold a valid driver's licence from another province, state or country? If 'Yes' state where below. Provide Driver's Licence Number, Effective and Expiry Dates, Driver's Licence Class. 5 Have you ever held a Manitoba driver's licence or a learner's licence? If 'Yes', state in what year below. 6 Have you had any name changes within the last five years? If 'Yes' provide former name(s) below, if you haven't already reported the change to Manitoba Public Insurance.

Français au verso



Box 6300 Winnipeg, MB R3C 4A4 (204) 985-7000

Driver Unavailable – Declaration of Residency

A)	I,		_, of(Print Street Address or P.O. Box)	, in
		(Print Name)		
	(Print	city or Town)	, in the Province of Manitoba do hereby state and decla	are that
	I am a person resident of the Province of Manitoba, that I am legally entitled to be in Canada and I live and am ordinarily present in Manitoba, or intend to live in Manitoba on a permanent basis.			
	Mv driv	ver's licence number is	·	
	,	(Ple	ease Print)	
B)	IAMT	EMPORARILY ABSENT FROM MAN	IITOBA BECAUSE I AM	
			of study at an educational institution (university, college, technical arning recognized by the registrar) outside Manitoba, or	school,
		taking a sabbatical leave, or advance employment, or	ced or supplementary training or instruction while on educational l	eave from
		serving as a missionary or aid worker registered charity under the <i>Income</i>	er on behalf of a religious or nonprofit organization approved as a Tax Act (Canada), or	
		employed with the Government of N or	Manitoba, the Government of Canada, or an agency of either gove	ernment,
		temporarily absent from Manitoba for assuming a temporary employment	or a period not exceeding 12 consecutive months for the purpo of fulfilling a contract, or	se of
		away for the winter (Snowbird), vaca	ation etcand	intend
		to return to and reside in Manitob condition/reason and reasonable	oa immediately after completion of the above indicated travelling time.	
author	rize		to pick-up/purchase my drive	r's licence.
		(Print Name and Contact Telephone Numb	<u>er</u>)	
		APPLICATION TO THE REGISTRAR MY MANITOBA DRIVER'S LICENC	R OF MOTOR VEHICLES IN SUPPORT OF MY APPLICATION O E.	F THE
		DATE	SIGNATURE	
CAU	TION:		HE DRIVER TO ENSURE COMPLIANCE WITH THE HIGHWAY ACH JURISDICTION IN WHICH HE/SHE OPERATES A VEHICL	

PLEASE CONTACT THE LOCAL LICENSING AUTHORITIES TO ENSURE THAT YOU ARE ALLOWED TO

MAINTAIN AND USE YOUR MANITOBA DRIVER'S LICENCE WHILE YOU ARE THERE.

Driver and Vehicle Licensing Box 6300 Winnipeg MB R3C 4A4

Telephone: (204) 985-7000 www.mpi.mb.ca