

**AUTOPAC AUTHORIZATION LETTER**

MPI Customer # or Driver's License #: \_\_\_\_\_

I, \_\_\_\_\_ authorize \_\_\_\_\_ to sign on my behalf to

(Circle One): RENEW CHANGE VEHICLE DESCRIPTION/COVERAGES CANCEL LAYUP

Autopac registration on my \_\_\_\_\_  
(Year, Make,Model,Serial number)

**Policy**

- Short Term Policy(30-244 Days) Effective Date:\_\_\_\_\_ Expiry Date: \_\_\_\_\_
- Effective Date:\_\_\_\_\_

**Primary use of vehicle:** Who is primary operator of vehicle? \_\_\_\_\_

- Pleasure (NOT used more than 4 times per month and not more than 1609km during a registration period, for work, business, school)
- All Purpose(Used to drive to or from work or school or any other everyday activities)
- Lay Up (Comprehensive coverage excluding collision and liability parked within MB)
- Farm
- Commercial

**Deductible:**

- \$500 (Basic)
- \$200
- \$300
- \$100

**Liability:**

- \$200,000(Basic)
- \$1,000,000
- \$2,000,000
- \$5,000,000
- \$7,000,000
- \$10,000,000

**Extension Coverages:**

- Auto Loss of Use Level 1
- Auto Loss of Use Level 2
- New Car Protection
- Leased Car Protection

**Payment Method:**

- Full Payment
- 4 Pay
- 12 Pay (Please use preauthorized payment info on my MPI account.

Credit card: \_\_\_\_\_ Expiry: \_\_\_\_\_

If eligible for credit (circle one): Leave credit on account / Send refund cheque to home address

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\*PLEASE NOTE: ONLY FULLY COMPLETED LETTERS OF AUTHORIZATION WILL BE ACCEPTED. \*\*\***