



Phoenix Insurance Brokers
www.hubinternational.com

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Grande Prairie, Alberta
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INSURED: J.D.A. VENTURES LTD.

ADDRESS: GRANDE PRAIRIE, AB

Automobile Driver's Abstract Authorization Form

DRIVER INFORMATION:

DRIVER'S NAME: _____

DRIVER'S ADDRESS: _____

DATE OF BIRTH: (MM/DD/YYYY) _____

DRIVERS LICENSE NO.: _____

PROVINCE OF LICENSE: _____

TYPE OF VEHICLE (please circle): LIGHT HEAVY BOTH

I _____, hereby authorize, **J.D.A. VENTURES LTD and/or Northbridge Commercial Insurance Corporation, and/or Hub International Phoenix Insurance Brokers** to obtain a copy of my Drivers Abstract. This is being done to verify the details of my Driving Record, including convictions, accidents and suspensions. This authorization is valid for the term of my employment with **J.D.A. VENTURES LTD..**

X _____
Signature of Driver

DATE: _____