

GUELPH POLICE SERVICE

15 Wyndham Street South, Guelph, Ontario N1H 4C6

Customer Service (519) 824-1212 Ext. 7321

Email : customerservice@guelphpolice.ca

To: Insurance Company/Adjusting Firm

From: Customer Service

In order for the report to be released to you, we require consent from the insured who is mentioned in the report.

AUTHORIZATION & DIRECTION

I, _____ ,

hereby authorize and direct the Guelph Police Service to release to

_____,
(Company Name)

_____ motor vehicle accident report witness statements

or

_____ property occurrence report

dated _____ , police report # _____.

And let this direction be your good and sufficient authority for so doing.

Dated at _____, this _____ day of _____ 20____.
(City)

Signature