

Application to Have a Conduct Record Adjusted
Heavy Vehicle Owners, Operators or DriversAvec vous,
au cœur de votre sécurité

Date of the application

Year Month Day

Note: Please fill out the form on screen.**Heavy Vehicle Owner, Operator or Driver** (Mandatory fields are marked with an asterisk (*).)☐ **Heavy vehicle owner or operator (HVOO)**

Business name*

Identification number*

Register Identification Number (RIN) from
the Commission des transports du Québec☐ **Heavy vehicle driver**

Last name*

First name*

Driver's licence number*

Person Filing the Application (Mandatory fields are marked with an asterisk (*).)

Last name*

First name*

Title or position

Business name*

**Business
address**

Street number

Street name

Municipality

Province

Postal code

Telephone*

Extension

Email*

Type of Adjustment☐ Offence☐ "Driver" out-of-service order☐ Mechanical inspection certificate☐ Other, specify: _____☐ Accident☐ Vehicle fleet☐ More than one type**Events Concerned****Date of
the event**

Year

Month

Day

Event number

**Date of
the event**

Year

Month

Day

Event number

**Date of
the event**

Year

Month

Day

Event number

**Date of
the event**

Year

Month

Day

Event number

If the application concerns more than four events, please provide the required information about the additional events (dates and event numbers) in the "Details and Description" section.**Details and Description**Please enclose any supporting documents with your application (*Notice of Non-Liability for an Accident, Application to Have an HVOO Record Adjusted – Heavy Vehicle Rental Company, power of attorney, rental contract, lease agreement, etc.*).

Details and Description – Continued

Protection of Personal Information

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For more information, consult the Policy on Privacy on the SAAQ's website at saaq.gouv.qc.ca/privacy or contact the SAAQ's call centre.

Mail this form to



**Direction des politiques, de la performance et
des relations avec le milieu**

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Québec (Québec) G1K 8J6

or

Fax it to



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