

Application for the Driver's Abstract  
of a Person Residing or Temporarily Living Outside QuébecAvec vous,  
au cœur de votre sécurité

## DRIVER'S LICENCE HOLDER

Last name		First name	
Québec driver's licence number	Date of birth (Year-Month-Jour)	Telephone Office	Extension Home

## AUTHORIZATION OF THE LICENCE HOLDER

Last address in Québec	Driver's abstract prepared in <input type="checkbox"/> French <input type="checkbox"/> English
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**Note: The driver's abstract will be sent to only one addressee and by only one means of delivery.**

I authorize the Société de l'assurance automobile du Québec to send me my driver's abstract.

☐ Mail to the following address  
(outside Québec only):  
*If the address is outside Canada,  
make sure you provide all the required  
information for an international address.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

or

☐ Fax to the following number  
(outside Québec only):

\_\_\_\_\_  
Country code      Local or area code      Fax number

\_\_\_\_\_  
Date (Year-Month-Day)\_\_\_\_\_  
Signature

Comments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Protection of Personal Information

The SAAQ only collects personal information that is necessary for it to exercise its powers and apply the laws it administers. All personal information gathered by authorized personnel is handled confidentially. This information may be shared with its licensing agents and certain government departments or agencies, including those located outside Québec, in accordance with the *Act respecting Access to documents held by public bodies and the Protection of personal information*. It may also be used for statistical, survey, study, audit or investigative purposes. Failure to provide this information can result in a refusal of service. You may consult, correct or obtain a copy of any personal information concerning you.

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

Send

• By fax:  
418-644-7167

or

• By mail: Division de la diffusion (act. 850)  
**Société de l'assurance automobile du Québec**  
333, boulevard Jean-Lesage  
Case postale 19600, succursale Terminus  
Québec (Québec) G1K 8J6