



# Consumer AutoPlus Request Form

(CGI USE)

**Date:** \_\_\_\_\_

**Time:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\*This is the address your Consumer AutoPlus Report will be mailed to only if it matches the address on file (see point #2 below). If not you will be contacted with instructions on how to get the address on file changed.

**Daytime Phone Number:** \_\_\_\_\_

**Driver's License Number:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

Send your request by **one** of the options below:

- Fax: 1-514-415-3989
- Mail: CGI Technical Assistance Centre  
1350 Rene-Levesque West, 7<sup>th</sup> Floor  
Montreal, PQ  
H3G 1T4
- Scan and email: [insurance.helpdesk@cgi.com](mailto:insurance.helpdesk@cgi.com)

By signing this request you agree:

1. You are requesting your own personal information.
2. The AutoPlus report will only be mailed to the most recent address on file.
3. CGI will mail a copy of your personal report via regular mail within 10 business days of receiving your request.
4. A Consumer AutoPlus Report provides your individual automobile policy and claims history as reported by the Canadian Property and Casualty (P&C) industry.
5. CGI will provide one report within a 12 month period.
6. CGI stores and reports data and is not authorized to make changes to this data.
7. If you do not agree with the information on your AutoPlus Report please contact the Complaint Officer/Ombudsperson, of the insurer, that provided the data. A list of these individuals can be found on the Financial Services Commission of Ontario website <http://www.fSCO.gov.on.ca/english/insurance/resolvecomplaint-insurance.asp> and select "Company Consumer Complaint Officers".
8. You have read, understand and agree to the guidelines as described.