

Automobile Insurance Declaration For Retiree Discount

<i>Policy Number If Applicable</i>	<i>Effective Date of Discount</i>			<i>Insurance Company</i>
	Year	Month	Day	

<i>Name of Insured</i>	<i>Broker:</i> Worden Insurance & Financial Services Ltd.
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On making application for a Retiree Discount, I _____ declare that:

- a) I am retired;
I do not earn or receive income from any office or employment;
I am not engaged in any profession occupation, and am not operating a business; and
I have not been employed for 26 weeks or more in the last 52 weeks;

and

- b) I am age 65 or older, or
I am in receipt of a pension under the Canada Pension Plan or the Quebec Pension Plan,

or

I am in receipt of a pension registered under the Income Tax Act, Canada

and

- c) I am the principal operator of the automobile to which this discount is assigned.

I agree that should my status under A, B or C above change, I will notify my Insurance Company as I acknowledge that such a change in status may affect the premium charged for my Automobile Insurance.

Signature of Retiree

Date