



Temporary COVID-19 - Customer Authorization for Driver Licence, Vehicle Registration and Insurance Transactions

Customer Number: _____ Driver's Licence Number: _____

I, _____ hereby authorize _____
(Print your Name) (Print Name and Contact Telephone Number)

To complete the following transaction(s) on my/our behalf on the following vehicle(s):

(Licence Plate Number, Year, Make & Model of Vehicle, VIN)

Driver Licence: (select all that apply)

- Renewal, Reapplication of a lapsed driver licence, DL Replacement, Basic ID card replacement (no information changes)

Vehicle Transaction: (select all that apply)

- Renewal/Reactivation/Reapplication, New Application, Short Term, Effective Date, Mid-Term Change, Cancellation, Expiry Date

Policy Coverage:

Deductible:

Third Party Liability:

Extension Loss of Use:

- All Purpose, Pleasure, Other, Commuter, \$500, \$300, \$200, \$100, \$200,000, \$1,000,000, \$2,000,000, \$5,000,000, \$7,000,000, \$10,000,000, Level 1, Level 2, Declined

Excess Value over \$50,000: _____

New Vehicle Protection _____

Declared Value (if applicable): _____

Leased Vehicle Protection _____

Off-Road Vehicle options:

Motorcycle Options:

Other Options:

- Third Party Liability, Accident Benefits, Collision Coverage, Comprehensive Coverage, Collision Coverage, Comprehensive Coverage, Extension Loss Of Use, I require No Changes, Please amend to Lay-Up Insurance.

Lay-up Insurance:

Effective Date: _____

Manitoba address where vehicle is stored:

Cancellation:

Effective Date: _____

Plates Surrendered: YES NO

Lay-Up Insurance Declined (Initials): _____

X [Signature Box]

X _____

[Date Box]

Registered Owner's Signature

Authorized Person's Signature

Date



Temporary COVID-19 - Customer Unavailable - Declaration of Residency

A) I, _____, of _____, in _____, in the Province of Manitoba do hereby declare that
 (Print Name) (Print Street Address or section number) (Print City or Town)

I am a resident of the Province of Manitoba that my permanent address is indicated above, and that I am legally entitled to be in Canada.

My Manitoba Public Insurance Customer Number is: _____ and/or
 My driver's licence number is: _____.
 (Please Print)

B) I am **in** Manitoba but unable to attend in person because:

COVID-19

I authorize _____ to renew/purchase my driver's licence. I also authorize this person to renew/purchase vehicle registration and insurance policy(s) on my behalf if this form is accompanied with detailed authorization.

I MAKE THIS APPLICATION TO THE REGISTRAR OF MOTOR VEHICLES IN SUPPORT OF MY APPLICATION OF THE RENEWAL OF MY MANITOBA DRIVER'S LICENCE, AND/OR VEHICLE REGISTRATION AND INSURANCE POLICY(S).

DATE SIGNATURE

CAUTION: IT IS THE RESPONSIBILITY OF CUSTOMERS TO ENSURE COMPLIANCE WITH THE HIGHWAY SAFETY, DRIVER LICENSING, AND VEHICLE REGISTRATION LAWS OF THE JURISDICTION(S) IN WHICH THEY OPERATE A VEHICLE. PLEASE CONTACT THE LOCAL LICENSING/REGISTRATION AUTHORITIES TO ENSURE THAT YOU ARE ALLOWED TO MAINTAIN AND USE YOUR MANITOBA DRIVER'S LICENCE AND/OR VEHICLE REGISTRATION AND INSURANCE WHILE YOU ARE THERE.



Driver's Licence Questionnaire

Answer 'Yes' or 'No' to the following questions.

Caution: It is a punishable offence to knowingly make a false answer to any question.

1. Are you now prohibited by court from driving or is your driver's licence or right to obtain a driver's licence currently suspended or cancelled? Yes No
2. When driving do you require corrective lenses (glasses or contacts)? Yes No
3. Have you ever had any of the following conditions which have NOT PREVIOUSLY BEEN REPORTED to Driver & Vehicle Licensing Medical Records:
 - a) Seizures or blackouts? Yes No
 - b) Lung or heart trouble, eye diseases, stroke, diabetes treated with injectable insulin, mental disorder, dementia, or permanent limitation of movement? Yes No
 - c) Any other medical condition or physical disability that may affect your safe operation of a motor vehicle?
 Yes No

If 'Yes' to a), b) or c) the date and details of the condition(s) must be provided below.

4. Do you hold a valid driver's licence from another province, state or country? Yes No

If 'Yes', state where below. Provide Driver's Licence Number, Effective and Expiry Dates, Driver's Licence Class.

5. Have you ever held a Manitoba driver's licence or a learner's licence? Yes No

If 'Yes', state in what year below.

6. Have you had any name changes within the last five years? Yes No

If 'Yes', provide former name(s) below, if you haven't already reported the change to Manitoba Public Insurance.