



## PERSONAL INFORMATION CONSENT FORM

In order to provide insurance products and services to you, Optimum Insurance Company Inc. may need to collect, use or disclose personal information about you as required and as permitted pursuant to relevant privacy laws or other laws. Your personal information will only be used for the purposes disclosed to you and for which we have obtained your consent.

### COLLECTION OF INFORMATION

Depending on the type of insurance policy to which this consent applies, the following information may be collected from third party organizations:

- Previous insurance and claims history
- Personal credit information including your credit score as permitted by law
- Building inspection or appraisal reports
- Financial information
- Driving information including driver's license and motor vehicle report
- Employment information

### PURPOSE OF COLLECTION

We use your personal information to:

- offer, renew or change an insurance policy
- assess, manage, underwrite and rate risks
- determine eligibility and conditions of a premium payment plan
- process any claims you may submit
- detect and prevent fraud
- ensure that your information is accurate and up-to-date

### DISCLOSURE

We may provide your personal information to appropriate third parties such as:

- Insurance companies
- Your insurance broker for the purpose of your broker providing services to you
- Professionals working on behalf of the Company such as claims adjusters and lawyers
- Operators of insurance industry databases to verify information that you have provided to us

Optimum Insurance Company Inc. is committed to respecting your privacy and safeguarding your personal information. All personal information collected is kept in the strictest confidence. Only authorized personnel have access to your information and we have security systems and procedures in place to prevent the loss, misuse or unauthorized access or disclosure of your information.

I acknowledge that I have read and understood the information set out on this form. I hereby consent to the Company's collection, use and disclosure of my personal information. I also provide consent for the use of my personal credit information including my credit score as permitted by law and such consent remains valid until withdrawn by me in writing. By withdrawing or failing to provide my consent to the use of credit information, I understand that I may not benefit from the best rate available to me.

I may obtain a copy of or ask questions about the Company's personal information policy by contacting the Company's Privacy Officer.

Applicant/

Named Insured:

\_\_\_\_\_

Print Name

Signature

Date

Broker:

\_\_\_\_\_

Name

Signature

Date