

**PERSONAL INFORMATION CLIENT CONSENT FORM  
FOR THE PURPOSES OF  
INSURANCE AND FINANCIAL SERVICES**

**BETWEEN:**

**FAIR INSURANCE BROKERS LIMITED**

(The "Broker")

**AND**

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(The Client")

The Client hereby acknowledges that the Broker has been retained by the Client to acquire or renew a policy or policies of insurance or to provide Consulting and/or Risk Management Services for the Client, under which certain individuals, including the Client, or named individuals in addition to the Client, or where the Client is a commercial or other entity, its employees, servants and representatives (hereafter collectively called "insured individuals") may be insured.

The Client hereby consents to the Broker's collection, use and disclosure of personal information of such insured individuals, or providing such personal information to third parties as required, including insurance companies. Where there are insured individuals in addition to the Client, or where the Client is a commercial or other entity, the Client hereby covenants and warrants that the client has obtained the appropriate written consent from all of the insured individuals to disclose their personal information to the Broker for these purposes accordingly and will do so for any new insured individuals. See the attached disclosure consent form. The client agrees to provide the disclosure consent form on request.

As professional brokers, we are committed to holding our client's personal information in strict confidence, and we shall not disclose any such information unless authorized by our clients, required by law to do so or required to do so in conducting negotiations with underwriters or insurers on behalf of the client.

We or any insurer, to whom we submit your application may collect, use and disclose personal information for the purposes of:

- Offering and providing insurance and related products and services to customers.
- Underwriting and assessing risks in accordance with lawful requirements.
- Providing insurance companies with necessary information to investigate and pay claims
- As may be required and authorized by law

You may withdraw your consent at any time. If you refuse or withdraw your consent to the collection, use or disclosure of information about you, we may not be able to provide or continue to provide you with some products, services or information of value to you. Your policy may be cancelled as a result.

**For additional information on our brokerage's privacy policies and procedures, please ask your customer service representative and review our web site at [www.fairinsurance.com](http://www.fairinsurance.com) .**

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

Signature of Client:  
(Or an authorized signing Officer where  
the Client is a commercial or other entity)