

AGR Insurance Brokers

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Confirmation Form for:

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Optional Accident Benefits Confirmation Form

Aviva Traders

Income Replacement

- ☒ Standard
☐ \$600
☐ \$800
☐ \$1000

Caregiver, Housekeeping & Home Maintenance

- ☒ Standard
☐ All Impairments

Medical & Rehabilitation & Attendant Care

- ☒ Standard
☐ Medical & Rehabilitation (\$100,000)
☐ Attendant Care (\$72,000)
☐ Medical Rehabilitation (\$1,100,000) & Attendant Care (\$1,072,000)

Death and Funeral

- ☒ Standard
☐ Increased Optional

Dependant Care

- ☒ None
☐ Option

Indexation Benefit

- ☒ No
☐ Yes

Added Coverage to Offset Tort Deductible (OPCF 48)

- ☒ No
☐ Yes

I understand that my selections for these coverage's will affect the potential amount I can receive toward settlement should I be injured in an automobile accident. I warrant that the broker has fully explained the coverage and options outlined above and request the broker places automobile coverage on my behalf with the coverage limits and options as selected above.

Name

Date