Authorization to Purchase Rental Car Insurance

Customer Name	Customer # or Driver's License #
Hereby authorize	to issue rental car
insurance as follows:	
	to
Pick Up Date	Return Date
Location vehicle is rented:	Manitoba (\$3/day)
	Canada (\$8/day)
	USA (\$10/day)
Payment:	
V/C or M/C	Exp: CVV:
Customer Signature:	Date:
Proxy's Signature:	Date:



RETURN TO:

Email: autopac@rempelinsurance.com

Fax: 204-746-6246