

# APPLICATION FOR NON-RENEWAL OF AUTHORIZATION

## 1. Enterprise identification

Full name of the enterprise

AMP client number

## 2. Current contracts

Do you have any current contracts requiring an authorization to contract?

Yes

No

## 3. Signature

- ▶ I declare having read and understood the questions and statements in this application.
- ▶ I declare that all information set out in this application is true and complete.
- ▶ I authorize the AMP to transmit the information obtained to its partners so that they can carry out the necessary verifications to enable the AMP to examine the integrity of the enterprise concerned by the authorization renewal application, all in application of the ACPB.
- ▶ I understand that any false or misleading statement constitutes an offence under section 27.5 of the ACPB.

Full name of the respondent

Signature

Date (yyyy/mm/dd)

## 4. Transmission

Send this form by e-mail: [autorisation@amp.quebec](mailto:autorisation@amp.quebec)

Even if we receive your non-renewal request in advance,  
your authorization to contract will be valid until its expiry date.

**For any question, please contact us at 1 888 335-5550.**