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Department of Economic Development and Transportation

Pivalliayuliqiyikkut Ingilrayuliqiyitkullu

Ministère du Développement économique et des Transports

REQUEST FORM FOR DRIVER'S ABSTRACTS, SEARCHES AND ACCIDENT REPORTS

Please indicate which information you are requesting; if you are not picking up or arranging for delivery of the form to yourself, please submit a separate signed letter authorizing the release of the information that you are requesting.

Date of Request		**Signature**	

DRIVER'S ABSTRACT ($12.60 FEE)

Name (first, last)						
Date of birth (dd/mm/yyyy)						
Driver's Licence Number (requires 6-digit Nunavut driver's license number)						

SEARCHES ($12.10 FEE)

License Plate Number																	
Validation Tag Number																	
Vehicle Identification Number																	
Other																	

ACCIDENT REPORTS ($12.10 FEE)

File Number								
Date of Accident (dd/mm/yyyy)								
Parties Involved								
Validation Tag Number								

AUTHORIZATION TO RELEASE OF INFORMATION

Send report to myself	☐ Yes ☐ No
I hereby authorize the Motor Vehicles Division to send this report to:	
Name	
Mailing Address	
Email Address	

TO BE FILLED OUT BY MOTOR VEHICLES OR AGENT

Requested by			
Date (dd/mm/yyyy)			
Company name			
Interim Receipt #		Amount	
Issued by			
Signature (of Issuer)			

P. O. Box 10
Gjoa Haven, NU XOB 1J0
Phone: (867) 360-4616
Fax: (867) 360-4619

P. O. Box 2420
Cambridge Bay, NU XOB 0C0
Phone: (867) 983-4231
Fax: (867) 983-4011

P. O. Box 1000, Station 1575
Iqaluit, NU X0A 0H0
Phone: (867) 975-7840
Fax: (867) 975-7820

P. O. Box 88
Rankin Inlet, NU X0C 0G0
Phone: (867) 645-8466
Fax: (867) 645-8467

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Pivalliayuliqiyikkut Ingilrayuliqiyitkullu
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REMITTANCE SLIP

Please indicate method of payment for the attached invoices:

☐ **VISA** ☐ **MasterCard** ☐ **AMEX** (not available in Rankin Inlet)

Total Remittance: _____

_____
Card Holder Name

_____ _____
Credit Card Number Expiry Date

_____
Signature

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