



**NOTICE OF INTENTION TO WITHDRAW
FROM THE BUSINESS OF AUTOMOBILE INSURANCE IN ALBERTA**

I, _____ of
(Authorized Officer of the Insurer)

_____, ("the Insurer")
(Legal name of the Insurer)

file notice that the Insurer intends to withdraw from the business of automobile insurance in Alberta, subject to the necessary regulatory approvals, effective

_____.
(Proposed Date of Withdrawal)

The reasons that the Insurer intends to withdraw are as follows:

As of the date of this Notice, for the current calendar year, the total of the Insurer's direct written premiums for automobile insurance in Alberta is \$_____ and the total of its written exposures in Alberta is _____.

Please describe in detail how current contracts will be handled after the proposed withdrawal date (including time lines):

Certification by Officer of the Insurer

I, _____ (Name of Officer) _____ (Title)

certify that I am an authorized officer of the Insurer and have personal knowledge of the matters that are the subject of this Notice.

Signature of Officer

Date

The personal information provided on this form is collected under the authority of section 661.2 of the *Insurance Act* and section 33(c) of the *Freedom of Information and Protection of Privacy Act* (RSA 2000). The information will be used for administering the *Insurance Act*. It is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection of this information please contact Arthur Hagan, Deputy Superintendent of Insurance, at (780) 415-9226.