

Letter of Authorization for Temporary Operation Permit

To be completed by registered owner of vehicle

This Letter of Authorization permits _____ at
PRINT NAME OF THE PERSON OR COMPANY TO WHOM AUTHORIZATION IS GIVEN

PRINT ADDRESS OF PERSON OR COMPANY TO WHOM AUTHORIZATION IS GIVEN

to purchase an *ICBC Temporary Operation Permit (TOP)* for the following vehicle:

Model Year: _____ Make: _____ Model : _____

VIN: _____

BC Registration #: _____ For Number of Days: _____ (MAXIMUM 15)

Commercial Vehicle only: Laden Unladen

Coverage (check all required):

- BASIC \$1,000,000 Third Party Liability coverage
- Optional \$5,000,000 Third Party Liability coverage (includes Basic)
- Own Damage Coverage (Coll/Comp)
- Replacement Cost (if applicable)
- Limited Depreciation (if applicable)

Name and address of company or individual granting authorization

Owner Name: _____
PRINT NAME(S) OF THE REGISTERED OWNER OF THE VEHICLE DRIVER'S LICENCE NUMBER

Owner 2 Name (if applicable): _____
IF TWO OWNERS, PRINT NAME OF THE SECOND REGISTERED OWNER OF THE VEHICLE DRIVER'S LICENCE NUMBER

Address: _____
ADDRESS OF THE REGISTERED OWNER(S)

Date: _____ Signature: _____
IF SIGNING ON BEHALF OF A COMPANY, NOTE POSITION OR TITLE

Signature of Owner 2 (if applicable): _____
IF SIGNING ON BEHALF OF A COMPANY, NOTE POSITION OR TITLE

This Letter of Authorization is provided as a courtesy. Use of this Authorization is at your own risk and is not mandatory. You may use this form, or create your own, using this as a guideline.