**ON YOUR LETTERHEAD**

must include full legal name including Ltd. or Inc.

Your full address including postal code
Phone: (780)

Fax: (780)

October 19, 2022

Thor Insurance & Registries Ltd.

tjones@thorinsurance.ca

FAX 780 662 34233

Contact: Jane Hancock
Phone # 780
PUAN #

Please provide 5-year Commercial Driver Abstracts for the following drivers noted below, to verify eligibility of drivers to operate our company vehicles.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **First Name** | **Last Name** | **Driver’s License #** |  | **First Name** | **Last Name** | **Driver’s License #** |
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Thank you,

Jane Hancock

Full Company Name

Office Manager