

Application for exemption – Candidates from outside Québec

Insurance of persons and Group insurance of persons

This form is for any representative who:

- resides in a Canadian province or territory other than Québec;
- wishes to pursue activities in insurance of persons or group insurance of persons, or one of the sector classes thereof in Québec;
- has passed Exam 01-111 [Develop an ethical professional practice, in compliance with the rules governing the insurance of persons sector](#) in his province or territory of residence;
- wishes to rely on legal exemptions set out in section 53 of the [Regulation respecting the issuance and renewal of representatives' certificates](#) (if applicable).

Rights of access and correction

You may examine the personal information concerning you, obtain a copy of it or request that it be corrected if it is inaccurate, incomplete or equivocal, or if the collection, release or keeping of the information is not authorized by the *Act respecting Access to documents held by public bodies and the Protection of personal information*, CQLR, c. A-2.1. If you have any questions on this matter, please visit the AMF website at [Information Access](#).

Note

We recommend you obtain access to AMF E-Services by completing the form “Application to register for AMF E-Services – Non-residents of Québec” before submitting your application for an exemption.

After analyzing your application, the AMF will send you an official communication informing you whether it has been accepted or refused.

If you refuse or fail to provide us with the requested information and/or documents, we will not be able to process this application. Information about the legal exemptions provided for in section 53 of the Regulation is available on the AMF website.¹

¹ Becoming a professional > Insurance of persons > Compulsory training > Representatives from a Canadian province other than Québec or from a Canadian territory

Part 1 – Identification**Information**

Client No. (10 digits), if applicable

Ms.	First name	Last name
Mr.		

Date of birth: Language of correspondence: French English

Home address

Civic No.	Street	Apt.
City	Province	Postal code
Telephone (residence)	Telephone (business)	Ext.
Telephone (cell phone)	Personal e-mail address	

Part 2 – Statement

Please answer the following questions:

1. Do you reside in Québec? Yes No
2. Do you hold legal authorization to practise in another Canadian province or territory? Yes No
 - 2.1 If so, which province or territory?
 - 2.2 If so, what is the official title of your legal authorization to practise?
3. Have you practised in this sector or sector class in this province or territory for at least 24 of the past 36 months? Yes No

Important

Missing supporting documents will delay processing of your application.

You may be required to submit additional supporting documents.

Information CentreToll-free: 1-877 525-0337
Québec City: 418-525-0337
Montréal : 514-395-0337

Part 3 – Canadian supporting documents

Candidates who have practised LESS THAN 24 MONTHS in the past 36 months in their province or territory

Please attach a photocopy of the following documents to your application:

1. **CIPR number A**

2. **Copy of Canadian practising certificate/equivalent documentn**

This document issued by a competent authority shows that you held a legal authorization to practise when you resided outside Québec. It must be equivalent to the representative's certificate applied for in Québec.

3. **Official document confirming that the representative has passed Exam 01-111**

This official transcript is issued by the regulator or its authorized agent and confirms that you have passed Exam 01-111 - Develop an ethical professional practice, in compliance with the rules governing the insurance of persons sector.

4. **Proof of Canadian residency**

This is the proof that you were residing in a Canadian province or territory other than Québec when the authorization was issued by the competent authority. This proof must include your name and address. The following **valid proofs of residence** are accepted:

- Driver's licence issued by another Canadian province or territory
- Municipal or school tax bill
- Government postal correspondence
- Recent invoice from an energy, residential telephone service or cable supplier
- Hospital card accompanied by a health insurance card bearing a photograph
- Record of employment or pay stub
- Home or car insurance certificate or statement
- Transcript from a Canadian college or university
- Bank statement
- Canada Post change of address receipt

Part 3 – Canadian supporting documents (continued)

Candidates who have practised 24 MONTHS OR MORE in the past 36 months in their province or territory

Please attach a photocopy of the following documents to your application:

1. **CIPR number**
2. **Copy of Canadian practising certificate/equivalent document**
This document issued by a competent authority shows that you held a legal authorization to practise when you resided outside Québec. It must be equivalent to the representative's certificate applied for in Québec.
3. **Official document confirming that the representative has passed Exam 01-111**
This official transcript is issued by the regulator or its authorized agent and confirms that you have passed Exam 01-111 - Develop an ethical professional practice, in compliance with the rules governing the insurance of persons sector.
4. **Official history of the representative's right to practise in Canada**
This document issued by a competent authority shows that you practised for at least 24 months of the past 36 months in the sector or sector class in which you wish to practise in Québec.
5. **Detailed attestation from the employer**
This document is issued by a business on whose behalf you have acted and establishes that you have pursued the activities that fall within the scope of the sector or sector class in which you want to practise in Québec.

Part 4 – Canadian identity documents

If you are not registered for AMF E-Services, please provide one of the following identity documents.

Please attach a photocopy of one of the following valid Canadian identity documents to this form (check the box beside the document you are attaching):

Birth certificate issued by the Directeur de l'état civil of Quebec or another provincial or territorial authority	Citizenship card or certificate
Confirmation of Permanent Residence (IMM5292 or IMM5688)	Canadian passport
Permanent resident card	Work permit

Information Centre

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Part 5 – Declaration regarding information provided

I declare that the information provided herein is accurate and complete. I declare that I use my name as it appears on all my valid Canadian identity documents. I have attached all supporting documents required to process my application.

Ms.	First	Last
Mr.	name	name

Signature	Date
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Send your form via AMF E-Services, which can be accessed from the AMF website at www.lautorite.qc.ca. Select "Other" in the main menu of AMF E-Services, choose "Other application/request", then select "Other application/request – Qualification".