

Application to register for AMF E-Services

Non-residents of Québec

This form is for representatives (or future representatives) residing in a Canadian province or territory other than Québec or from another Canadian province or territory.

Use this form to apply for an access code for AMF E-Services.

If your application is accepted and you reside in a Canadian province or territory other than Québec, you will be allowed to access AMF E-Services at any time or for as long as you reside outside Québec.

After your application has been analyzed, the AMF will send you an e-mail 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.

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](#).

Important

It is recommended you use your **personal e-mail address**. Use of your work e-mail address should be avoided so as to prevent any login issues in the event you change employment.

If you have access to the Québec government's authentication service, please do not complete this form.

Information Centre

Toll-free: 1-877-525-0337

Québec City: 418-525-0337

Montréal: 514-395-0337

Part 1 – Identification

Renseignements

Client No. (10 digits), if applicable

Ms.	First name	Last name
Mr.		

Date of birth:	Language of correspondence:	French	English
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Home address

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

Part 2 – Statement

Please answer the following questions:

Do you reside in Québec? Yes No

Have you filed a tax return in Québec in the past five years? Yes No

Do you hold or have you ever held a Québec health insurance card? Yes No

Important

Missing supporting documents will delay processing of your application.

The AMF may determine that one or more additional proofs of identity are required.

A Québec driver's licence or health insurance card is not considered valid proof of identity.

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Part 3 – Canadian supporting documents**Representatives (or future representatives) residing in a province or territory of Canada other than Québec**

Please check one of the following valid Canadian identity documents and attach a photocopy of your document to this form:

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

Applicants certified in a province or territory other than Québec who are applying to act as a representative in Québec

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

The document issued by a competent authority showing that you held a legal authorization to practise when you resided outside Québec. The legal authorization must have been in effect in the year preceding this application. It must also be equivalent to the representative's certificate applied for in Québec.

Proof that you were residing in such Canadian province or territory when the authorization was issued by the competent authority. The 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

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Representatives applying to pursue activities in insurance of persons, group insurance of persons or a class of these sectors

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

CIPR number

Official transcript issued by the regulator or its authorized agent confirming the successful completion of exam 01-011 - *Develop an ethical professional practice, in compliance with the rules governing the insurance of persons sector.*

Part 4 – 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 using the Request for information form available in the “Contact us” section of our website at www.lautorite.qc.ca.