



## REQUEST FOR DOCUMENTATION IN ALTERNATE FORMAT

Echelon Insurance is committed to providing its customers information in an alternative format upon request. Please complete the form. Alternatively, you may submit your request by telephone to:

1-(800) 324-3566 Ext. 6682 or (905) 214-6682 or via e-mail to [ezelechowski@echeloninsurance.ca](mailto:ezelechowski@echeloninsurance.ca):

<i>Contact Information</i>	
Date:	Name:
Address	
Telephone Number:	E-mail Address:
<i>Information Request</i>	
Date Information is Required:	
Document Required:	
Format Requested:	
Additional Comments:	

I hereby authorize Echelon Insurance to use the information provided by me for the purpose of providing an alternate format of documentation. I understand that this information will be used only by the organization to fulfill my request. I further understand that my personal information will only be used to contact me as indicated above.

Signature: \_\_\_\_\_

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