

Consumer Report Form

In order to evaluate your eligibility for insurance products provided by the member insurers of the Chubb Group of Insurance Companies, certain reports will be ordered from independent consumer reporting agencies. These reports are a necessary part of the review of your application and are used to verify or supplement information that you may have already provided to us. Examples of the type of consumer reports that may be ordered include Motor Vehicle Report (MVR) or Insurance Claim Report.

The information obtained will only be used for business purposes within our agency and by the insurance company(ies) to which we submit your application(s). If you wish, we will provide you with the name, address and phone number of the consumer reporting agency who prepared the report.

Motor Vehicle Report

A Motor Vehicle Report (MVR) is obtained from any state Motor Vehicle Department that has licensed you, or other operators under your policy. This report reflects the driving record information they have on file for you including accidents and motor vehicle violations.

Insurance Claim Reports

Insurance claim reports, such as C.L.U.E. (Comprehensive Loss Underwriting Exchange) and others, are provided by independent consumer reporting agencies that collect claim information from many insurance companies. The claim information that is collected is retained and shared with other subscribing insurance companies.

Important Notice:

Personal information may be collected from persons other than you. Such information may in certain circumstances be disclosed to third parties without authorization, as allowed by law. Upon request, you are entitled to receive a notice of information practices.

You have the right to review and correct or amend information in your file, if you make a written request within 60 days of the date of this notice. If you disagree with the accuracy of the information, you have the right to request in writing a change, correction or deletion of that information. If your request is refused, you have the right to file a statement containing additional information or explaining why you disagree. That statement will be kept in your file.

If you make a written request within 90 days of the date of this notice, you have the right to review the specific items of information that support those reasons and the names and addresses of the institutional sources that supplied the information.

Agent's Name: _____ **Date:** _____

Applicant Name: _____ **Date:** _____
Please Print

Applicant's Signature: _____ **Date:** _____

Minnesota Applicants: This authorization form will remain valid for one year from the date you signed the authorization form.