

# Leduc Insurance Agency Inc.

5917 - 50 Street,  
Leduc, Alberta T9E 6S7  
Telephone : (780) 986-8424 Fax : (780) 986-1775

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## LETTER OF BROKERAGE

DATE: \_\_\_\_\_

TO: \_\_\_\_\_

RE: \_\_\_\_\_

INSURED: \_\_\_\_\_

Please be advised the \_\_\_\_\_ (Name of Insured)

of (Address) \_\_\_\_\_ does hereby appoint

LEDUC INSURANCE AGENCY INC. as our agent/broker of record. Effective this \_\_\_\_\_ day of \_\_\_\_\_ 2013.

This authorization of appointment supersedes all other appointments given or inferred and shall remain in effect until cancelled by either party named herein. LEDUC INSURANCE AGENCY INC. is hereby authorized to obtain any and all information including copies of policies, as may be deemed necessary by them to act in their capacity as our Insurance Agent/Broker.

It is understood that this letter prevents \_\_\_\_\_ (Name of previous Agent/Broker) from negotiations involving any insurance matters relating to the above policies (except for the collection of outstanding premium).

\_\_\_\_\_  
(Name of Insured)

\_\_\_\_\_  
(Name of Insured)

\_\_\_\_\_  
(Signature of Insured)

\_\_\_\_\_  
(Signature of Insured)

\_\_\_\_\_  
DATE