

First and last names of insured _____

Y Y Y Y M M D D

Date of birth

Policy/application number _____

1. Do you presently use alcoholic beverages? ☐ Yes ☐ No

If yes, please indicate the number of drinks in each category below on a daily, weekly or monthly basis:
(one serving = 150 ml or 5 oz. of wine, 341 ml or 12 oz. of beer or 45 ml or 1.5 oz. of spirits)

| | Wine | Beer | Liquor |
|---------|------|------|--------|
| Daily | | | |
| Weekly | | | |
| Monthly | | | |

2. Has your consumption been higher in the past? ☐ Yes ☐ No

If so, please indicate type, number of drinks, frequency as well as the reason and date of the change in the habits.

3. With regard to your consumption of alcohol, have you:**a) been advised to reduce or cease your consumption or consulted a healthcare professional?** ☐ Yes ☐ No

If yes, date: Y Y Y Y M M

Name and contact details of the professional consulted: _____

b) had therapy or treatment? ☐ Yes ☐ No

If yes, type of treatment or therapy: _____

Start date: Y Y Y Y M M End date: Y Y Y Y M M

Name and contact details of the doctor or establishment consulted: _____

Is this your only period of treatment or therapy? ☐ Yes ☐ No

If no, please specify the number of times and dates: _____

c) attended support group meetings? ☐ Yes ☐ NoIf yes, start date Y Y Y Y M M End date Y Y Y Y M M or ☐ still attending**4. Have you ever been charged with or found guilty of impaired driving?** ☐ Yes ☐ No

If yes, please provide the date of the infraction and the date your licence was restored. _____

5. Declaration

I acknowledge having fully understood all of the questions above and that the answers given are true and complete. In addition, I consent to having them as an integral part of the requested insurance policy.

X

Signature of insured (signature of the father, mother or legal guardian if the insured is a minor)

Y Y Y Y M M D D

Date of signature

Protection of personal information

Protecting your personal information is a priority for Beneva. To find out more about our practices, please consult the *Personal Information Protection Statement* located at [Beneva.ca](https://www.beneva.ca).