

Instructions: For the applicant and each household member over the age of 18 whose personal information is being provided to 407 ETR under the Route Relief Program, please read the following statements and indicate your understanding and agreement to them by printing your name, signing, and dating below.

1. I hereby consent to 407 ETR and its third-party agent collecting my personal information which may include, without limitation, information related to my household income and expenses, Notice of Assessment, pay stubs, and statements of remuneration from federal and/or provincial income assistance programs. I understand that this information will be used to review, process, and otherwise managing my household's enrollment in the Route Relief Program and as further described in 407 ETR's Privacy Notice located at www.407etr.com.
2. If I am a household member over the age of 18 (and not the applicant named below), I hereby authorize the applicant to provide my personal information to 407 ETR and its third-party agent for such purposes.
3. I hereby confirm that my consent and authorization is provided freely and with an adequate understanding of the purposes for which 407 ETR will use my personal information (as described above), and such consent and authorization will apply, as needed, for the duration of my household's enrollment in the Program.
4. I acknowledge that I may withdraw my consent and authorization at any time by contacting 407 ETR or its third-party agent, and this may affect my household's eligibility in the Program.
5. To protect my privacy, I will remove and/or redact any unnecessary personal information, such as my Social Insurance Number, Driver's Licence Number, as well as any account numbers and passcodes assigned by third parties.

Applicant	_____	_____	_____
	Full Name	Signature	Date
Household Member 1	_____	_____	_____
	Full Name	Signature	Date
Household Member 2	_____	_____	_____
	Full Name	Signature	Date
Household Member 3	_____	_____	_____
	Full Name	Signature	Date
Household Member 4	_____	_____	_____
	Full Name	Signature	Date

[You may add a page to include additional household members, if required.]