

FACILITY ASSOCIATION REFUSAL LETTER

Date:

Insured's Name:

Vehicle Year, Make & Model:

VIN:

Insurer's Name:

Broker Name:

Ensurco
180 Bullock Drive, Suite 201
Markham, ON L3P 1W2

Signature:

Reason for Refusal:

_____ has refused due to _____ tickets and _____ claims in the past _____ years. Risk does not qualify per OIC filings.