



MOCLI60527A

Facility: _____

Dossier :	_____
Nom, Prénom :	_____
Date de naissance :	_____ <input type="checkbox"/> F <input type="checkbox"/> M aaaa-mm-jj
NAM :	_____ Exp. _____ aaaa-mm
Nom, Prénom de la mère :	_____

AUTHORIZATION TO COMMUNICATE INFORMATION – RECORD OF DECEASED USER

IMPORTANT: ENTER THE DECEASED USER'S INFORMATION IN THE UPPER RIGHT CORNER OF THE FORM.

I, the undersigned, _____
(Requester's name and address)

In my capacity as:

Heir, successor, legatee by particular title or liquidator of the succession¹

Explain in detail the right you wish to exercise / why and in what capacity you are seeking access. *Use the space on the reverse.*
If applicable, attach proof of the steps you are taking (legal proceedings or contesting the will).

Documents required based on the capacity in which you are applying:

- Death certificate if the user died at another institution;
- Document proving the requester's capacity: user's will, life insurance policy, etc.;
 - If holographic will or will made before two witnesses: proof of homologation of the will;
 - If no will: birth certificate / marriage certificate / proof of common-law relationship (e.g., income tax return);
- Will search certificate issued by the Chambre des notaires and the Barreau du Québec.

Spouse, ascendant or descendant to obtain the cause of death¹

Documents required depending on the case:

- Death certificate if the user died at another institution;
- Proof of relationship² with the user: birth certificate;
- Marriage certificate, act of civil union, or proof of common-law relationship (e.g., income tax return).

Spouse or close relative for the bereavement process¹

Explain how the requested information is likely to help you in your bereavement process. *Use the space on the reverse.*

The request will be approved only if the deceased did not state their opposition.

Documents required depending on the case:

- Document establishing a family relationship with the deceased. (e.g., birth or marriage certificate)
- Where applicable, a description of the circumstances that enables us to understand your emotional ties with the deceased.

Person related by blood¹

Genetic or hereditary disease under investigation: _____

Documents required depending on the case:

- Death certificate if the user died at another institution;
- Proof of relationship² with the user: birth certificate.

Authorize the institution/facility: _____

¹ According to the Act respecting health and social information

² Relationship of the child to the father, mother

