



**AUTHORIZATION TO REQUIRE DISCLOSURE AND OBTAIN DOCUMENTS  
(SECTIONS 4, 5 AND 11 OF THE REGULATION RESPECTING THE PRACTICE OF THE  
PROFESSION OF CERTIFIED TRANSLATOR, TERMINOLOGIST OR INTERPRETER WITHIN A  
PARTNERSHIP OR A JOINT STOCK COMPANY)**

COMPANY NAME: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Represented by: \_\_\_\_\_

Title or function: \_\_\_\_\_

Hereby duly authorized, who authorizes the persons, committees, councils and tribunals referred to below, in accordance with section 192 of the Professional Code, to require disclosure of and obtain any document listed in section 11 of the Regulation respecting the practice of the profession of certified translator, terminologist or interpreter within a partnership or a joint-stock company from any person or to obtain a true copy of such a document:

- 1° a professional inspection committee or a member, inspector, investigator or expert of such a committee as well as the person responsible for professional inspections appointed in accordance with section 90 of the Professional Code;
- 2° a syndic, an assistant syndic or a corresponding syndic or an expert whose services are retained by the syndic;
- 3° a review committee referred to in section 123.3 of the Professional Code or a member of such a committee;
- 4° a disciplinary council or a member of such a council;
- 5° the Professions Tribunal or one of its judges;
- 6° any committee of inquiry established by a board of directors or a member of such a committee;
- 7° an administrator designated by the government under section 14.5 of the Professional Code;
- 8° a person, committee or member of a committee designated by the board of directors for the purposes of applying section 89 of the Professional Code, i.e., the compensation fund committee;
- 9° a committee appointed by the board of directors under section 52.2 of the Professional Code or a member of such a committee.

Protection of personal information

OTTAQ takes the protection of your personal information seriously. All information contained in this form will be used for the purposes of protecting the public and supervising the practice of the profession, as well as for statistical and survey purposes. As such, any OTTIAQ staff members may have access to your information in the course of their duties. Your contact information may also be used by OTTIAQ or its representatives for associative purposes, to communicate information relevant to the practice of the profession or to promote goods or services. Your information will be saved as long as it serves the needs of OTTIAQ, in compliance with the applicable laws.

Consent

By submitting this form, I consent to the use of the information contained herein under the conditions described above.

In witness whereof, I signed at \_\_\_\_\_, on \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(City) Year Month Day

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Member number