



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

User's date of death : _____
yyyy-mm-dd

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

Nom : _____ Prénom : _____ #Dossier : _____
To send to: _____ or ☐ Same as above
(Name and address)

The following information: _____

Regarding the care or services received during the following period: _____

Requester's signature

Date

- ☐ Explain in detail the right you wish to exercise / why and in what capacity you are seeking access:
☐ Explain how the requested information is likely to help you in your bereavement process.

ACT RESPECTING HEALTH AND SOCIAL SERVICES INFORMATION

27. An heir, a successor, a legatee by particular title or a liquidator of the succession of a deceased person, or a person designated by a deceased person as a beneficiary of life insurance or of a death benefit, has the right to be informed of the existence of and to have access to information concerning the deceased person that is held by a body, provided it is necessary for the exercise of their rights and obligations in that capacity. (...)

28. The spouse or close relative of a deceased person has the right to be informed of the existence of and to have access to information concerning the person where the information could help them in their grieving process, unless the deceased person refused access to that information under subparagraph 1 of the first paragraph of section 8.

29. The spouse, a direct ascendant or a direct descendant of a deceased person has the right to be informed of the existence of and to have access to information relating to the cause of the person's death that is held by a body, unless the deceased person refused access to the information under subparagraph 2 of the first paragraph of section 8.

30. Persons genetically related to a deceased person have the right to be informed of the existence of and to have access to information concerning the deceased person that is held by a body, provided it is necessary for verifying the existence of a genetic or hereditary disease. The right may be exercised even if the deceased person refused access to information concerning the cause of his or her death under subparagraph 2 of the first paragraph of section 8.