![AGA BENEFIT SOLUTIONS logo]

ACCESS APPLICATION/USER AGREEMENT TO THE
ADMINISTRATORS' PORTAL
For monthly billing access only

☐ Initial application   ☐ Add a new administrator   ☐ Add access to one or more division(s)

                               ☐ Delete an administrator   ☐ Delete access to one or more division(s)

                               Effective date of application: _____

> *To ensure the confidentiality and protection of your group's employees' personal information, upon receipt of this application, AGA will contact the administrator designated on file to confirm the application.*

Information to be provided on the group/person in charge of the contract

Group name	Group No.
Name of person in charge of the contract	Telephone No.:

Information on the Administrator

Administrator' name		
☐ To add ☐ To delete		
Group/Division address		
E-mail	Telephone No.	Language ☐ French ☐ English
Specify for what division(s) access is being applied for: Divisions: ☐ All ☐ Specify: _____		

Information on the Administrator

Administrator's name		
☐ To add ☐ To delete		
Group/Division address		
E-mail:	Telephone No.	Language ☐ French ☐ English
Specify for what division(s) access is being applied for: Divisions: ☐ All ☐ Specify: _____		

User agreement for the person in charge of the contract

The person in charge of the contract agrees to abide by the confidential nature of the personal information available on the **Administrators' Portal** and shall ensure that designated administrators do likewise. The person in charge of the contract agrees to delete an administrator's access to the **Administrators' Portal** at the moment when he or she shall depart from the company. The person in charge of the contract accepts the responsibility for the use of the **Administrators' Portal** and agrees that AGA shall not be liable for the access and use of the **Administrators' Portal** by the administrators, including but without being limited thereto, any use of the **Administrators' Portal** by any other person using an administrator's username and password. The person in charge of the contract does not hold AGA liable for any claims issued or damages issuing from or related to any access or use by the administrators or any other person using the administrator's username and password.

Signature of the person in charge of the contract	Date

Agreement governing the administrator's use

I hereby acknowledge that the use of my username and my password has the same value as my signature and that it is my full responsibility to keep this information confidential. I agree to abide by the confidential nature of the personal information available on the **Administrators' Portal**.

Signature of the Administrator	Date
Signature of the Administrator	Date

Section reserved for AGA

Application received by	Received on	Access authorized on

AGA (2012-04)