

REQUEST FOR COMPENSATION FROM THE STM

Direction - Affaires juridiques

1 of 2

CUSTOMER CLAIM FORM

Please check the circle indicating the location of the incident.

Bus

Métro

Paratransit

CLAIMANT

Madam Mister

Last name: _____ First name: _____ Age: _____

Street address: _____

City: _____ Province: _____ Postal code: _____

Home telephone: _____ Work telephone: _____ Cell: _____

E-mail: _____

THE EVENT

1. Date: _____ 2. Time: _____

3. Place: _____

4. Witness(es): _____

5. Address and telephone number of witness(es):

6. STM event report number if available: _____

7. Police (SPVM) report number if available: _____

8. STM comment or complaint number (Customer service): _____

9. Amount claimed: _____ 10. Purchase date of article claimed: _____

STM VEHICLE INVOLVED

Vehicle number: _____ Line number: _____ Route or stop number: _____

License plate number: _____

(Please turn over)



REQUEST FOR COMPENSATION FROM THE STM

Customer claim form (continued)

2 of 2

DESCRIPTION OF EVENT – FACTS SURROUNDING ACCIDENT/INCIDENT

Did you report this event to an STM employee? If so, when and to whom?:

CHECK DOCUMENTS PROVIDED (Do not forget to provide the documents)

- | | | |
|--|--|---|
| <input type="radio"/> Joint report | <input type="radio"/> Medical letter (medical diagnosis) | <input type="radio"/> Medical certificate |
| <input type="radio"/> Receipt | <input type="radio"/> Photo(s) | <input type="radio"/> Estimate |
| <input type="radio"/> Statement of earnings (pay slip) | <input type="radio"/> Letter from employer confirming employment and number of days of lost work | |
| <input type="radio"/> Other | | |

Signature: _____ Date: _____

PLEASE SEND THIS FORM TO THE FOLLOWING ADDRESS

STM
Direction - Affaires juridiques/Réclamations
800 De La Gauchetière West
P.O. Box 2000, suite 1170 (ground floor)
Montréal, Québec H5A 1J6
Telephone : 438 387-5023
Email : reclamation@stm.info

By submitting this form, you agree that the Société de transport de Montréal (STM) may collect and use your personal information for the purposes for which you have provided it. Failure to provide this information may result in a refusal of the requested service. You have the right to access your personal information and to request that it be corrected if needed. For more information, see our [Privacy and confidentiality policy](#).

