B2B BANK
DEALER SERVICES

Import Data

Reset Form

Client Information Change Form

Fax to: 416.413.0593

Client Services Telephone: 416.964.0028 Or 1.800.387.2087

1. ACCOUNT INFORMATION

Indicate if the account is one of these accounts (if not, leave blank): ☐ Group ☐ Locked-In or RRIF ☐ IPP

CLIENT NAME (LAST)

FIRST

ACCOUNT NO.

CLIENT NAME (LAST)

FIRST

DEALER / ADVISOR NO.

2. CLIENT ADDRESS

NOTE: 2 signatures are required - either Client and Advisor/Authorized Dealer **OR** Advisor and Authorized Dealer

☐ Change residence address ☐ Change mailing address

ADDRESS

CITY

PROVINCE

POSTAL CODE

COUNTRY

( ) –

CELL TELEPHONE NUMBER

( ) –

RESIDENCE TELEPHONE NUMBER

( ) –

BUSINESS TELEPHONE NUMBER

EMAIL ADDRESS

You authorize B2B Bank Dealer Services (“B2BBDS”) to share updates to your personal information with B2B Bank if your investment account is associated with a B2B Bank Investment Loan. You authorize B2B Bank to update your B2B Bank accounts with your updated personal information that includes your personal address (residential and mailing), phone and cell number(s), and email address.

CLIENT SIGNATURE

DATE (mm/dd/yyyy)

ADVISOR SIGNATURE

DATE (mm/dd/yyyy)

CLIENT SIGNATURE

DATE (mm/dd/yyyy)

AUTHORIZED DEALER SIGNATURE
(i.e. Branch Manager)

DATE (mm/dd/yyyy)

Authorized Dealer: By signing this form, you attest that client authorization for the address change has been obtained.

3. DEALER/ADVISOR

NOTE: Client and Authorized Dealer must sign for a Dealer Change. Client or Authorized Dealer must sign for an Advisor change.

DEALER NAME (PLEASE PRINT)

DEALER NO.

ADVISOR NAME (PLEASE PRINT)

ADVISOR NO.

You authorize B2BBDS to share updates to this information with B2B Bank if your investment account is associated with a B2B Bank investment loan.

CLIENT SIGNATURE

DATE (mm/dd/yyyy)

ADVISOR SIGNATURE

DATE (mm/dd/yyyy)

CLIENT SIGNATURE

DATE (mm/dd/yyyy)

AUTHORIZED DEALER SIGNATURE
(i.e. Branch Manager)

DATE (mm/dd/yyyy)

Authorized Dealer: By signing this form, you attest that the assets being received have been reviewed and that your dealer is properly registered/licensed to offer, advise on and supervise these assets.

4. ANNUAL ACCOUNT FEE PAYMENT METHOD – The method chosen will apply to all of your accounts and replaces any previously chosen method

A ☐ Charge my chequing account as per the banking information in section 5. This bank account will be used each year for withdrawal of annual account fees on or about June 1, which will vary based on the applicable fee schedule provided. Unpaid fees will be collected from your B2BBDS account(s). Please see the Pre-Authorized Debit (PAD) Terms & Conditions below for more information on the CPA Rule H1 Requirements that apply to this fee payment option.

B ☐ Deduct fees from my individual B2BBDS Investment Account. **NOTE:** Client must sign.

C ☐ Deduct fees from my B2BBDS registered account, including my B2BBDS tax-free savings account, up to the fee applicable per account, then from my B2BBDS investment account(s), if any. **NOTE:** Client must sign.

- **By selecting option A and signing this section, you hereby waive any pre-notification requirements as specified by sections 15(a) and (b) of the Canadian Payments Association Rule H1 with regards to pre-authorized debits.**
- You authorize B2B Bank Dealer Services ("B2BBDS") to debit the bank account provided for the amount(s) and in the frequencies instructed.
- If this is for your own personal investment, your debit will be considered a Personal PAD by Canadian Payments Association definition. If this is for business purposes, it will be considered a Business PAD.
- You have certain recourse rights if a debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this pre-authorized debit agreement. To obtain more information on your recourse rights, you may contact your financial institution or visit ***www.cdnpay.ca***.
- You confirm that all persons whose signature are required to authorize transactions in the bank account have signed in below.
- You may change these instructions or cancel this plan at any time, provided that B2BBDS receives at least 10 business days notice by phone or by mail. To obtain a copy of a cancellation form or for more information regarding your right to cancel a pre-authorized debit agreement, please consult with your financial institution or visit the Canadian Payments Association website at ***www.cdnpay.ca***.
- B2BBDS is authorized to accept changes to this agreement from my/our registered dealer or my/our advisor in accordance with the policies of B2BBDS, in accordance with the disclosure and authorization requirements of the CPA.
- You agree that the information in this form will be shared with the financial institution, insofar as the disclosure of this information is directly related to and necessary for the proper application of the rules applicable for pre-authorized debits.
- You acknowledge and agree that you are fully liable for any charges incurred if the debits cannot be made due to insufficient funds or any other reason for which you may be held accountable.
- You have requested this application form and all other documents relating hereto to be in English. J'ai exigé que ce formulaire et tous les documents y afférant soient rédigés en anglais.

DEPOSITOR SIGNATURE ______ DATE (mm/dd/yyyy) ______ CLIENT SIGNATURE ______ DATE (mm/dd/yyyy) ______

JOINT DEPOSITOR SIGNATURE ______ DATE (mm/dd/yyyy) ______ CLIENT SIGNATURE ______ DATE (mm/dd/yyyy) ______

ADVISOR SIGNATURE ______ DATE (mm/dd/yyyy) ______

5. BANKING INFORMATION – Attach a Void Cheque

Change my banking information for the following:

EFFECTIVE DATE (mm/dd/yyyy) ______

☐ ANNUAL ACCOUNT FEE PAC ☐ PAC ☐ RIF/LIF/LRIF/PRIF/RLIF (EFT) ☐ SWP (INVESTMENT & TFSA ACCOUNTS ONLY) (EFT) ☐ LOANS (B2B BANK INVESTMENT LOAN PAYMENT)

☐ CHANGE BANKING INFORMATION AT FUND COMPANY FOR CASH DISTRIBUTIONS (INDICATE FUND CODES): ______

BANK NAME ______ BANK TRANSIT NO. ______ BANK ACCOUNT NO. ______

You authorize B2BBDS to share updates to this information with B2B Bank if your investment account is associated with a B2B Bank investment loan.

DEPOSITOR SIGNATURE ______ DATE (mm/dd/yyyy) ______ DEPOSITOR SIGNATURE ______ DATE (mm/dd/yyyy) ______

NOTE: Bank account holder(s) must sign.

ADVISOR SIGNATURE ______ DATE (mm/dd/yyyy) ______

6. CLIENT NAME

PREVIOUS

LAST NAME ______ FIRST NAME ______ PREVIOUS SIGNATURE ______

NEW

LAST NAME ______ FIRST NAME ______ NEW SIGNATURE ______

NOTE: Client must sign both previous and new. Dealer must signature guarantee or attach a legal document with client's new name.

SIGNATURE GUARANTEE ______ DATE (mm/dd/yyyy) ______ ADVISOR SIGNATURE ______ DATE (mm/dd/yyyy) ______

You authorize B2B Bank Dealer Services ("B2BBDS") to share updates to your personal information with B2B Bank if your investment account is associated with a B2B Bank Investment Loan. You authorize B2B Bank to update your B2B Bank accounts with your updated personal information that includes your legal name.

7. SUCCESSOR ANNUITANT AND BENEFICIARY DESIGNATION (optional) – applicable only to B2BBDS Registered Accounts, with the exception of TFSA Accounts

I hereby revoke any previous successor annuitant designation and any previous beneficiary designation with respect to this account.

A For RSPs, Locked-in RSPs/LIRAs and RLSPs: In the event of my death, I hereby designate the following person as my designated beneficiary entitled to receive my interest in this Account if living at my death. I reserve the right to revoke this designation.

NAME

RELATIONSHIP

ADDRESS

***Caution:* Any designation made in Section 8A or 8B above is subject to the following:**

- For the purposes of this designation, spouse refers to a person recognized as your spouse or common-law partner for the purposes of the *Income Tax Act* (Canada).
- **The validity of a designation of a beneficiary or successor annuitant is subject to the applicable pension legislation and the laws of the jurisdiction where you reside, if any, permitting designations to be made otherwise than by way of a will.**
- In the absence of a designated beneficiary or successor annuitant, the proceeds of your Account will be paid to your estate.
- Notwithstanding any designation by you to the contrary, your spouse (within the meaning of the applicable pension legislation) may automatically be entitled to the benefits under one or more of your Accounts including your Locked-in RSP/LIRA, RLSP, LIF, RLIF, PRIF or LRIF.
- Your designation above will not be revoked or changed automatically by any future marriage or divorce. Should you wish to change your designated beneficiary or successor annuitant, you will have to do so by means of a new designation.
- Any designation made above shall apply to this Account only. If you have other accounts for which you wish to designate a beneficiary or successor annuitant you must complete a separate designation for each of these accounts.

B For RIFs, LIFs, LRIFs, RLIFs and PRIFs: In the event of my death (pick one or both):

☐ I hereby elect that my spouse, if living and remaining my spouse at the time of my death shall continue to receive payments as successor annuitant under my Account and to the extent possible and permitted by law shall acquire all rights I have as holder thereof. I reserve the right to revoke this designation; or

SPOUSE'S NAME

SPOUSE'S SOCIAL INSURANCE NUMBER

☐ If: (a) the successor annuitant named above, if any, predeceases me or is not my spouse at the time of my death; or (b) I have not elected any successor annuitant under my Account; then I hereby designate the following person as my designated beneficiary entitled to receive my interest in this Account if living at my death. I reserve the right to revoke this designation.

NAME

RELATIONSHIP

ADDRESS

NOTE: Client must sign.

CLIENT SIGNATURE

DATE (mm/dd/yyyy)

ADVISOR SIGNATURE

DATE (mm/dd/yyyy)

8. SUCCESSOR HOLDER AND BENEFICIARY DESIGNATION (optional) – applicable only for TFSA Accounts

I hereby revoke any previous successor holder designation and any previous beneficiary designation with respect to this B2BBDS Tax-free Savings Account.

A In the event of my death I hereby designate my spouse*, if living at my death, as the successor holder of this B2BBDS Tax-free Savings Account to acquire all rights I have as the holder thereof. I reserve the right to revoke this designation.

SPOUSE'S NAME

SPOUSE'S SOCIAL INSURANCE NUMBER

* Spouse refers to a person recognized as your spouse or common-law partner for the purposes of the Income Tax Act (Canada). The person you designate as a successor holder must be your spouse at the time of your death.

B In the event that the successor holder designated by me in A predeceases me or where I have not named a successor holder in A, I hereby designate the following person as my designated beneficiary entitled to receive the proceeds of this B2BBDS Tax-free Savings Account in the event of my death. I reserve the right to revoke this designation.

NAME

RELATIONSHIP

ADDRESS

In the absence of a designated beneficiary or successor holder, the proceeds of this B2BBDS Tax-free Savings Account will be paid to your Estate.

Caution:

1. **The validity of a designation of a beneficiary or successor holder is subject to the laws of the jurisdiction where you reside permitting designation made otherwise than by way of a will.**
2. Your designation of a successor holder and/or beneficiary to this B2BBDS Tax-free Savings Account by means of this designation form will not be revoked or changed automatically by any future marriage or divorce. Should you wish to change your successor holder or beneficiary in the event of a future marriage or divorce, you will have to do so by means of a new designation.
3. This designation of successor holder and/or beneficiary will apply to this B2BBDS Tax-free Savings Account only. If you have other tax-free savings accounts with B2B Trustco as trustee for which you want a successor holder or beneficiary to be designated, you must complete a separate designation for each of these accounts.

NOTE: Client must sign.

CLIENT SIGNATURE

DATE (mm/dd/yyyy)

ADVISOR SIGNATURE

DATE (mm/dd/yyyy)

B2B Bank Dealer Services includes B2B Bank Financial Services Inc., B2B Bank Securities Services Inc., and B2B Bank Intermediary Services Inc. B2B Bank Financial Services Inc. and B2B Bank Securities Services Inc. are members of the Canadian Investment Regulatory Organization (CIRO) and members of the Canadian Investor Protection Fund (CIPF). B2B Bank Intermediary Services Inc. is operating in Quebec and regulated by the Autorité des marchés financiers (AMF). B2B Bank is a trademark used under license.