

ON	LY one method required
	Copy by fax
	Original by mail/courier

Personal Pre-authorized Debit Agreement for Mortgages Held in a Registered Plan

Fax to: 416.413.0593 Tel: 416.964.0028 199 Bay Street, Suite 610 PO Box 35 STN Commerce Court

				Toronto C	IN INISE UAS	
1. Mortgagor-Payor information Last name		First name			nitial	
Joint bank account holder last name (If applicable	*)	First name	1	nitial		
Company/Corporation name						
2. Additional information						
Mortgagor/Borrower name						
Property address (street no. & name, apt. no.)						
City	Province	Postal code				
3. Pre-authorized debit (PAD) instruction	 S					
Effective date: mm/dd/yyyy						
☐ Commence PAD (see chart below for details) ☐ Change existing fixed PAD amount (see chart b ☐ Change banking information for PAD	elow for details)	Change next PAD dat Attached is a cheque Other:	te to: mm/dd/yyy for the first monthly payment	уу	-	
B2B Bank Dealer Services Registered Plan	Dollar amount	B2B Bank Dealer Services Registered Plan		Dollar amount		
number		1	number			
Note: A minimum notification of ten (10) busine	ess days prior to the next P/	AD payment is requi	ired to change or process PA	AD instructions.		
4. Banking information (A void cheque m	nust be attached.)					
Financial institution	,	Branch address				
Transit number	Bank number		Bank account number			
5. Signatures and authorization						
1. By signing this form, I/we authorize B2B Bank of the account held at the financial institution indicated shall be made by pre-authorized debit or electrofinancial institution where the account is held is 2. I/We hereby waive any pre-notification requiregards to pre-authorized debits. 3. I/We agree that the information in this form will I directly related to and necessary for the proper 4. B2B Bank is authorized to accept changes to thi 5. I/We confirm that all persons whose signatures agreement below. 6. I/We may change these instructions at any time time, provided that B2B Bank receives 30 days cancel a pre-authorized debit agreement, I/we n? I/We have certain recourse rights if any debit do that is not authorized or is not consistent with the institution or visit cdnpay.ca. 8. I/We acknowledge and agree that I am/we are fror which I/we may be held accountable. 9. I/We acknowledge that B2B Bank may assignowledge in the complex of the same and documents y afferant soient redigés en anglais. The undersigned hereby authorizes the executauthorizing such payment and debit.	ated on this agreement, the armic withdrawals or in such manot required to verify that the prements as specified by sections be shared with the financial insupplication of the rules applicates agreement from the Planhold are required to authorize transt, provided that B2B Bank recenotice by mail or fax. To obtain any consult with my/our finances not comply with this agreet is PAD Agreement. To obtain utily liable for any charges incurrent this PAD Agreement to an all other documents relating he	nounts noted above a nner as B2B Bank man payment is drawn in a tions 15(a) and (b) of stitution that holds my able for pre-authorizeder in accordance with actions in the bank arrives at least 10 days in a copy of a cancella ial institution or visit thement. For example, I/more information on its interest of the debits can other payee in the fuereto to be in English	and in the frequencies instructe ay determine. I/we understand accordance with this authorizat if the Canadian Payments As I/our account, insofar as the dist debits. In the policies of B2B Bank, and the policies of B	ed. I/We agree the that the branch of ion. sociation Rule I sclosure of this in ave signed this ave signed this y cancel this plar on regarding my, iation website at imbursement for ay contact my/out funds or any other than the second of t	at payments of the H1 with Information is In at any your right to cdnpay.ca. any debit or financial Inter reason Inter et tous les	
Mortgagor-Payor signature	Date (mm/dd/yyyy)	Joint bank account	holder signature	Date (mm/dd/yy	уу)	
B2B Bank Dealer Services includes B2B Bank Financial S	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					

Instructions on how to complete this form

B2B BANK DEALER SERVICES	ONLY one method r Copy by fax Original by m		for Mort	Pre-authorized I gages Held in a Fax to: 4 199 Bay Street, Suite 610 PC	Register 16.413.0593 Tel: Box 35 STN Co	ed Plan 416.964.0028
Mortgagor-Payor informati Last name	on		First name			Initial
Joint bank account holder last name	First name	name				
Company/Corporation name			1			
2. Additional information Mortgagor/Borrower name						
Property address (street no. & name	apt. no.)					
City	* * *	Province		Postal c	ode	
3. Pre-authorized debit (PAD) Effective date: mm/dd/yy	instructions					
Commence PAD (see chart below Change existing fixed PAD amout Change banking information for P	t (see chart below for deta	ails)	Change next PAD da Attached is a cheque Other:	te to:mm/dd/y	ууу	_
B2B Bank Dealer Services Regis number	tered Plan Dol	lar amount	B2B Bank Deale	er Services Registered Plan number	Dollar	amount
Note: A minimum notification of te			AD payment is requ	ired to change or process F	PAD instruction	s.
4. Banking information (A vol Financial institution	d cheque must be att	acned.)	Branch address			
Transit number	Ba	ank number	1	Bank account number		
5. Signatures and authorization	on					
By signing this form, live authorize the account held at the financial in shall be made by pre-subtrored of the account held at the financial in shall be made by pre-subtrored of the shall be	stitution indicated on this bebit or electronic withdraw unt is held is not required cation requirements as this form will be shared w or the proper application or changes to this agreemen e signatures are required is at any time, provided the lives 30 days notice by mis ement, live may consult any debit does not comp issient with this PAD Agre	agreement, the ail to verify that the specified by sec tith the financial in of the rules applicate from the Planhol to authorize trans at B2B Bank received in the rules applicated in the rules applicated in the rules and the rules and the rules are the rules and the rules are the	mounts noted above- anner as BZB Bank m payment is drawn in tions 15(a) and (b) c stitution that holds m able for pre-authorize der in accordance wit sactions in the bank s eives at least 10 days in a copy of a cancell cial institution or visit ment. For example, I, more information on	and in the frequencies instruct and other time. We understan accordance with this authoriz of the Canadian Payments A yofour account, insofar as the of diebits. In the policies of B2B Bank. account specified in Section 4 in notice by mail or fax. I/We mation form or for more informe the Canadian Payments Asso, who have the right to receive it mylour recourse rights, twe it	ted. I/We agree id that the brancl ation. Association Rule disclosure of this have signed this lay cancel this plation regarding naciation website a reimbursement from any contact my/	that payment h of the e H1 with information i s lan at any ny/our right to at cdnpay.ca. or any debit our financial
8. I/We acknowledge and agree that for which I/we may be held account for which I/we may be held account 9. I/We acknowledge that B2B Bar 10. I/We have recuested this applicate documents y afferant solent redige The undersigned hereby authorize authorizing such payment and debit	itable. Ik may assign this PAD tion form and all other do s en anglais.	Agreement to an cuments relating h	other payee in the f hereto to be in Englis	future. h. J'ai exigé/Nous avons exig	é que ce formula	aire et tous les
Mortgagor-Payor signature B2B Bank Dealer Services includes B2B B	Date (mm/c lank Financial Services Inc., I		Joint bank account Services Inc., and B2B		Date (mm/dd/) B2B Bank Financia	
and B2B Bank Securities Services Inc. are Bank Intermediary Services Inc. is operati	members of the Canadian Ir	vestment Regulator	y Organization (CIRO) a	nd members of the Canadian Inve	stor Protection Fur	
SEE OVERLEAF		Page	1 of 1		276-03-190	E (12/31/2024

Method of transmission

Indicate whether this form is being submitted by fax or if the original form is being mailed or couriered to B2B Bank Dealer Services. Please note that B2B Bank Dealer Services is not responsible for duplicate transactions if the request is sent more than once.

Mortgagor-Payor information

Provide the information requested regarding the Mortgagor-Payor.

Pre-authorized debit (PAD) information

Complete this section if the Mortgagor-Payor wishes to begin, or make a change to, a PAD on an existing account. Indicate both the frequency required and the commencement date. If this information is not indicated, the plan will be established for the next scheduled payment. A void cheque imprinted with the Mortgagor-Payor's name must be enclosed for a new PAD or a change in banking information.

B2B Bank Dealer Services Registered Plan number

Provide the Planholder's B2B Bank Dealer Services Registered Plan number.

Banking information

Provide information regarding the Mortgagor-Payor's bank account from which they wish to have the noted transactions debited. A void cheque imprinted with the Mortgagor-Payor's name must be enclosed for a new PAD or a change in banking information.

Please enclose one (1) additional cheque for one (1) monthly payment.

Signatures and authorization

In addition to the date, the Mortgagor-Payor's signature is required on this form. The signature of all persons whose signatures are required to authorize transactions are also required on the form.