B2B BANK
DEALER SERVICES

Import Data

Reset Form

Trusted Contact Person Information Update

We are required to ask you for the name and contact information for a person that you trust to assist us in protecting your investments. This person does not make any financial decisions or act on your behalf. We would contact this person to confirm or make inquiries about any of the following:

- Possible financial exploitation or mistreatment affecting you or your account
- Concerns about your mental capacity or health status as it relates to your financial decision making
- The identity of your legal guardian, executor, trustee, or other personal or legal representative
- Your current contact information

If you would like to appoint a Trusted Contact Person, please complete the information below. By completing this section and signing this form, you authorize your advisor or dealer to contact your Trusted Contact Person named below to obtain the information needed to validate the concerns about you or to disclose to the Trusted Contact Person such information as the Trusted Contact Person may require in order to obtain the information or help needed. You acknowledge having read and understood the section ''Additional Information'' disclosed in this form.

☐ **I decline to provide a Trusted Contact Person**

1. Primary Trusted Contact Person for this account

☐ **Add/update** ☐ **Withdraw**

For account number(s) ______________________

1–Mr. 2–Mrs. 3–Miss 4–Ms. 5–Dr. 6–Prof.	Last name	First name	Initials

Full residential address (not a P.O. box)	Apt.

City	Province	Postal code

Country of Residence	Email address

Cell telephone number	Residence telephone number	Work telephone number

Relationship to client

In the event the Trusted Contact Person named above refuses or is unavailable to provide assistance or is financially mistreating you, the dealer or the advisor may contact the following person:

2. Alternate Trusted Contact Person

☐ **Add/update** ☐ **Withdraw**

For account number(s) ______________________

1–Mr. 2–Mrs. 3–Miss 4–Ms. 5–Dr. 6–Prof.	Last name	First name	Initials

Full residential address (not a P.O. box)	Apt.

City	Province	Postal code

Country of Residence	Email address

Cell telephone number	Residence telephone number	Work telephone number

Relationship to client

3. Client Authorization

Client signature	Date	Co-applicant signature	Date

4. Dealer/Advisor Information

Dealer name	Dealer number	Advisor name	Advisor number

Advisor signature	Date

Additional Information

By signing this form, you understand and agree that:

Only the information necessary to discuss the concerns about you and assist you may be disclosed to your Trusted Contact Person(s). This could include, but is not limited, to medical information, details of your personal life, financial holdings and transactions.

A temporary hold on transactions may be placed by the dealer or advisor for the time that is necessary to address the situation and concerns about you. You will be notified if such a hold is placed.

The dealer or advisor will first contact the Primary Trusted Contact Person. The Alternate Trusted Contact Person will be contacted in the event the Primary Trusted Contact Person refuses, is unable or unavailable to assist or is suspected of financially exploiting or mistreating you.

You will be solely responsible of notifying you Trusted Contact Person(s) of this appointment, the circumstances under which they may be contacted and the fact that you have given their contact information to the dealer or advisor. You confirm that you are duly authorized by your Trusted Contact Person(s) to do so.

Only you may revoke this consent or change your Trusted Contact Person(s) at any time by notifying in writing the dealer or advisor.

Your Trusted Contact Person(s) cannot execute any transactions, make any financial decisions or act on your behalf.

The dealer or advisor may contact your Trusted Contact Person(s) should one of the situations mentioned above occur, but they are not legally obligated to do so and cannot be held in any way responsible for not doing so.