

| A division of | f B2B Bank | Securities |
|---------------|------------|------------|
| Services Inc | - | |

| ONLY one method required |
|----------------------------|
| □ Copy by fax |
| ☐ Original by mail/courier |

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

Fax to: 416.413.0733 Tel: 416.413.7201
199 Bay Street, Suite 610 PO Box 35 STN Commerce Court
Toronto ON M51 0A3

| Services Inc. | | | | Toronto ON M5L 0A3 |
|--|--|--|---|--|
| 1. Mortgagor-Payor information | | | | |
| Last name | | First name | | Initial |
| Joint bank account holder last name (If applicable | :) | First name | | Initial |
| Company/Corporation name | | | | |
| 2. Additional information | | | | |
| Mortgagor/Borrower name | | | | |
| Property address (street no. & name, apt. no.) | | | | |
| City | Province | | Postal code | e |
| 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 below to Change banking information for PAD | pelow for details) | Change next PAD date to: Attached is a cheque for the first Other: | | У |
| B2B Bank Discount Brokerage Registered Plan number | Dollar amount | B2B Bank Discount Registered Plan | Brokerage | Dollar amount |
| | | 330930000000000000000000000000000000000 | | |
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| Note: A minimum notification of ten (10) busin | ess days prior to the next P | AD payment is required to cha | ange or process PA | D instructions. |
| 4. Banking information (A void cheque m | nust be attached.) | | | |
| Financial institution | , | Branch address | | |
| Transit number | Bank number | Bank acc | count number | |
| 5. Signatures and authorization | | | | |
| By signing this form, I/we authorize B2B Bank of debit the account held at the financial institution payments shall be made by pre-authorized debit the financial institution where the account is hele I/We hereby waive any pre-notification requiregards to pre-authorized debits. | indicated on this agreement, to relectronic withdrawals or i | the amounts noted above and in n such manner as B2B Bank m | n the frequencies inst | tructed. I/We agree that |
| I/We agree that the information in this form will directly related to and necessary for the proper B2B Bank is authorized to accept changes to this I/We confirm that all persons whose signatures | s agreement from the Planhold | der in accordance with the polici | ies of B2B Bank. | |
| 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 7. I/We have certain recourse rights if any debit do that is not authorized or is not consistent with the | notice by mail or fax. To obtain nay consult with my/our financ | n a copy of a cancellation form ial institution or visit the Canadi | or for more information ian Payments Associa | on regarding my/our right to ation website at cdnpay.ca. |
| institution or visit cdnpay.ca.8. I/We acknowledge and agree that I am/we are f for which I/we may be held accountable. | ully liable for any charges incu | irred if the debits cannot be made | de due to insufficient | funds or any other reason |
| I/We acknowledge that B2B Bank may assig I/We have requested this application form and documents y afférant soient rédigés en anglais. | all other documents relating h | nereto to be in English. J'ai exig | é/Nous avons exigé o | que ce formulaire et tous les |
| The undersigned hereby authorizes the execu authorizing such payment and debit. | tion of the above. My/Our fin | ancial institution is authorized to | o treat each debit as i | f I/we had issued a cheque |
| | | | | |
| Mortgagor-Payor signature | Date (mm/dd/yyyy) | Joint bank account holder sig | jnature ^I | Date (mm/dd/yyyy) |

B2B Bank Discount Brokerage is a division of B2B Bank Securities Services Inc. (an IIROC member, Member — Canadian Investor Protection Fund). B2B Bank is a trademark used under license.

Instructions on how to complete this form

| EZB BANK DISCOUNT BROWERAGE A division of B2B Bank Securities Services Inc. | ONLY one method Copy by fax Original by r | | for Mort | Pre-authorized I gages Held in a Fax to: 4 199 Bay Street, Suite 610 PO | Registered Pla |
|--|---|--|--|--|--|
| Mortgagor-Payor information Last name | n | | First name | | Initial |
| Joint bank account holder last name | (If applicable) | | First name | | Initial |
| Company/Corporation name | | | | | |
| 2. Additional information | | | | | |
| Mortgagor/Borrower name | | | | | |
| Property address (street no. & name | , apt. no.) | | | | |
| City | | Province | Postal co | | ode |
| 3. Pre-authorized debit (PAD) i | nstructions | | | | |
| Commence PAD (see chart below Change existing fixed PAD amoun Change banking information for PA | t (see chart below for de | etails) | Change next PAD da Attached is a cheque Other: | te to:mm/dd/y for the first monthly payment | yyy |
| B2B Bank Discount Brokerage R Plan number | egistered Do | ollar amount | B2B Bank Regis | Discount Brokerage tered Plan number | Dollar amount |
| | | | | | |
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| Note: A minimum notification of te | n (10) business days i | prior to the next l | PAD payment is requ | ired to change or process F | PAD instructions. |
| 4. Banking information (A voice | | | , | | |
| Financial institution | | | Branch address | | |
| Transit number | E | Bank number | | Bank account number | |
| 5. Signatures and authorizatio | | | | | |
| D. sississ this fame I for authorize | DOD Dools on behalf of | DOD Deels Dieses | ent Bentument' elient | | d to on the *Disabelder") to |
| . By signing this form, I/we authorize debit the account held at the finance payments shall be made by pre-au- payments shall be made by pre-authorized. If the financial institution where the a L. I/We hereby walve any pre-notific regards to pre-authorized debits. J. I/We agree that the information in t directly related to and necessary for 1.22B Bank is authorized to accept c | B2B Bank on behalf of ial institution indicated of thorized debit or electro count is held is not rec- cation requirements at this form will be shared in the proper application hanges to this agreeme | with the financial i of the rules applie nt from the Planho | institution that holds m cable for pre-authorize older in accordance wit | y/our account, insofar as the of debits. h the policies of B2B Bank. | disclosure of this information |
| By signing his form, live authorize diebit he account held at the finan payments shall be made by pre-au appreciate shall be made by pre-au appreciate shall be made by pre-au appreciate so pre-authorized debits. Live agree hat he information in derectly related to and necessary for developing the shall be appreciated by the same preciated by the same preciated by the same provided that I parsons who agreement below. Live many change these instruction time, provided that I 252 Sank receives the same provided that I 252 Sank receives the | BZB Bank on behalf of iali institution indicated thorized debit or electro- count is held is not rec- tation requirements as his form will be shared the proper application has form will be shared the proper application and the proper application says and the provided so at any time, provided we so did any notice by rement. I live may consul any debit does not con istent with this PAD Ag any ways are fall. | with the financial is of the rules applicated from the Planhold to authorize trait that B2B Bank recentil or fax. To obtate this agreement. To obtain the planhold from the pl | institution that holds meable for pre-authorize lolder in accordance wit neactions in the bank a ceives at least 10 days ain a copy of a cancell incial institution or visit rement. For example, I in more information on curred if the debits car. | y/our account, insofar as the of d debits. In the policies of B2B Bank, account specified in Section 4, notice by mail or fax. I/We mail or form or for more informathe Canadian Payments Asso we have the right to receive imy/our recourse rights, live to my/our recourse rights, live! | have signed this information have signed this ay cancel this plan at any atton regarding my/our right ciation website at cdnpay. ceimbursement for any debit may contact my/our financial and funds or any other research |
| By signing this form, live authorize debit the account held at the financial chief the financial residual to the financial to the financial residual residual to the financial residual resid | BZB Bank on behalf of thorized debit or electro indicated of the control to the control the control the control the proper application the proper application the proper application set any time, provided we so do days notice by rement. I we may consult any debit does not con istent with this PAD Ag arm/we are fully liable if table. | with the financial is of the rules applied from the Planho do authorize transition that B2B Bank recensil or fax. To obtain the first poly with this agreement. To obtain or any charges into Agreement to a locuments relating | institution that holds meable for pre-authorize cable for pre-authorize older in accordance wit neadton in the bank is ceives at least 10 days ain a copy of a cancell incid institution or visit rement. For example, in more information on curred if the debits car inother payee in the to the pre-payee in the the pre-payee in the the pre-payee in the the pre-payee the pre-payee in the the pre-payee the pre-payee in the the pre-payee the pre-payee t | y/our account, insofar as the of debits. In the policies of B2B Bank. account specified in Section 4 notice by mail or fax. I/We mails on form or for more inform the Canadian Payments Asso we have the right to receive my/our recourse rights, liwe innot be made due to insufficie uture. In Jai exigé/Nous avons exig. | have signed this information have signed this ay cancel this plan at any ay cancel this plan at any the signed signed and the signed signed signed as the signed signed at can pay contact myour financial int funds or any other reason the que ce formulaire et tous it |
| By signing his form, live authorize diebit he account held at the finan payments shall be made by pre-au appreciate shall be made by pre-au appreciate shall be made by pre-au appreciate so pre-authorized debits. Live agree hat he information in derectly related to and necessary for developing the shall be appreciated by the same preciated by the same preciated by the same provided that I parsons who agreement below. Live many change these instruction time, provided that I 252 Sank receives the same provided that I 252 Sank receives the | BZB Bank on behalf of thorized debit or electro indicated of the control to the control the control the control the proper application the proper application the proper application set any time, provided we so do days notice by rement. I we may consult any debit does not con istent with this PAD Ag arm/we are fully liable if table. | with the financial is of the rules applied from the Planho do authorize transition that B2B Bank recensil or fax. To obtain the first poly with this agreement. To obtain or any charges into Agreement to a locuments relating | institution that holds meable for pre-authorize cable for pre-authorize older in accordance wit neadton in the bank is ceives at least 10 days ain a copy of a cancell incid institution or visit rement. For example, in more information on curred if the debits car inother payee in the to the pre-payee in the the pre-payee in the the pre-payee in the the pre-payee the pre-payee in the the pre-payee the pre-payee in the the pre-payee the pre-payee t | y/our account, insofar as the of debits. In the policies of B2B Bank. account specified in Section 4 notice by mail or fax. I/We mails on form or for more inform the Canadian Payments Asso we have the right to receive my/our recourse rights, liwe innot be made due to insufficie uture. In Jai exigé/Nous avons exig. | have signed this information have signed this ay cancel this plan at any ay cancel this plan at any the signed signed and the signed signed signed as the signed signed at can pay contact myour financial int funds or any other reason the que ce formulaire et tous it |
| By signing this form, live authorize doi: https://doi.org/10.1009/10.1 | BZB Bank on behalf of thorized debit or electro indicated of the control to the control the control the control the proper application the proper application the proper application set any time, provided we so do days notice by rement. I we may consult any debit does not con istent with this PAD Ag arm/we are fully liable if table. | with the financial of of the rules applied to the rules applied to the rules applied to authorize transmit of a rule and the rules applied to authorize transmit or fax. To obtain the rules apply with this agreement. To obtain or any charges into a greement to a locuments relating a above. My/Our first applied to a rule applied to a rule applied to a rule applied to a rule applied to the rules applied to t | institution that holds meable for pre-authorize cable for pre-authorize older in accordance wit neadton in the bank is ceives at least 10 days ain a copy of a cancell incid institution or visit rement. For example, in more information on curred if the debits car inother payee in the to the pre-payee in the the pre-payee in the the pre-payee in the the pre-payee the pre-payee in the the pre-payee the pre-payee in the the pre-payee the pre-payee t | yolur account, insofar as the debths, say of account specified in Section 4 notice by mail or far. I/We matter be causalise Plyments Assomytour because the Canadian Plyments Assomytour counts of the canadian Plyments Assomytour recourse rights, I/We month to made due to insufficie tuture. 1. Jai exigé/Nous avons exig dithorized to treat each debit a distorted to treat each debit a | have signed this information have signed this ay cancel this plan at any ay cancel this plan at any the signed signed and the signed signed signed as the signed signed at can pay contact myour financial int funds or any other reason the que ce formulaire et tous it |
| By signing this form, live authorize debit the account held at the financial debit the count held at the financial residuation where the a Livek energy and the financial residuation where the a Livek energy away and pre-notified and a contract of the contract of the country financial country entire to an of necessary for accept presided to and necessary for superior to the country of the count | iB2B Bank on behalf of all institution indicated institution indicated institution indicated cocount is held in not rectain requirements a initial formation requirements as his form will be shared the proper application or supplication in the proper application is signatures are requirements as it and the provided view 50 days notice by remainful from the provided view 50 days notice by remainful from the provided view 50 days notice by remainful from the provided view 50 days notice by 10 days not the provided view 50 days notice by 10 days not the provided view 50 days notice by 10 days not the provided view 50 days notice by 10 days not the provided view 50 days not the provided view | with the financial i of the rules applied to the rules apply with this agreement. To obtain or any charges into the rules applied to the rules apply applied to the rules apply applied to apply applied to the rules appli | institution that holds accelerate realistic pre-patients accelered for pre-authorize polder in accordance with the bank accelerate realistic pre-patient accepts of a cancell and a copy of a cancell enterent. For example, a compared to the control of the control | your account, insofar as the debts, as and debts, as and debts, as a debts, as | disclosure of this information have signed this ay cancel this plan at any store regarding mylour right actions wester at chappy, calcium westers at chappy calcium westers at chappy cannot be a chappy ca |

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 Discount Brokerage. Please note that B2B Bank Discount Brokerage 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 Discount Brokerage Registered Plan number

Provide the Planholder's B2B Bank Discount Brokerage 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.