

CLIENT ACCOUNT NUMBER

**Application for a Trading Authority, Corporate/Legal Entity Accounts****INFORMATION ABOUT THE TRADING AUTHORITY**

ID NUMBER

MOTHER'S MAIDEN SURNAME

TITLE

FIRST NAME

INITIAL

LAST NAME

DATE OF BIRTH (MM/DD/YYYY)

COUNTRY OF CITIZENSHIP

SOCIAL INSURANCE NUMBER (Required for online account access)

SSN / TIN\*

Please provide your ScotiaCard number or Scotia iTRADE User ID if you have one. We require your Mother's Maiden Surname for future identification purposes.

\*If U.S. citizen or U.S. dual citizen Social Security Number (SSN) required.

**RESIDENTIAL ADDRESS**

STREET ADDRESS/LEGAL ADDRESS (ADDRESS CANNOT BE A POST OFFICE BOX)

APT/SUITE NO.

**ADDITIONAL ADDRESS INFORMATION**

CITY

PROVINCE

POSTAL CODE

HOME PHONE NUMBER

BUSINESS PHONE NUMBER

EXT.

CELL PHONE NUMBER

PAGER NUMBER

FAX NUMBER

PRIMARY EMAIL ADDRESS

☐ HOME☐ BUSINESS

Which number would you prefer we use to contact you during market hours?

☐ BUSINESS ☐ HOME ☐ CELL**EMPLOYMENT INFORMATION**

EMPLOYMENT STATUS

☐ EMPLOYED☐ RETIRED☐ STUDENT☐ SELF-EMPLOYED☐ HOMEMAKER☐ NOT WORKING☐ OTHER

EMPLOYER

POSITION

YEARS WITH THIS EMPLOYER

EMPLOYER'S ADDRESS

CITY

PROVINCE

POSTAL CODE

Are you employed by the Scotiabank Group?

☐ YES ☐ NO

IF YES, SPECIFY.

Are you an Insider of Scotiabank or have you been advised that you are a Designated Person by Scotiabank's Compliance Department?

☐ YES ☐ NO

Are you or members of your household employed by an IIROC (Investment Industry Regulatory Organization of Canada) Member Firm (Pro)?

☐ YES ☐ NO

*Note: Certain conditions may apply to accounts for employees of firms in the securities industry and accounts over which such persons have trading authority.*

If retired, we require previous employment information.

If self-employed or consultant, please specify industry".

**FINANCIAL INFORMATION****HAVE YOU OWNED OR TRADED?**

Select your level of knowledge.

- |   |                              |                                   |                               |
|---|------------------------------|-----------------------------------|-------------------------------|
| <input type="checkbox"/> MUTUAL FUNDS                   | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> HIGH |
| <input type="checkbox"/> FIXED INCOME (OTHER THAN CSBs) | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> HIGH |
| <input type="checkbox"/> STOCKS                         | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> HIGH |
| <input type="checkbox"/> MARGIN                         | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> HIGH |
| <input type="checkbox"/> OPTIONS                        | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> HIGH |
| <input type="checkbox"/> SHORT SALES                    | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> HIGH |
| <input type="checkbox"/> OVERALL INVESTMENT EXPERIENCE  | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> HIGH |

**INFORMATION REQUIRED BY SECURITIES REGULATORS AND COMPLIANCE**

Are you or your spouse considered to be an Insider (as defined in a Provincial Securities Act) of any public companies?

☐ YES ☐ NO

IF YES, WHAT IS THE NAME OF THE COMPANY(IES)? \_\_\_\_\_

Are you, or your spouse, singularly, or as part of a group, in a control position (as defined in a Provincial Securities Act) of any public companies?

☐ YES ☐ NO

IF YES, WHAT IS THE NAME OF THE COMPANY(IES)? \_\_\_\_\_

Are you, or your spouse an employee, Director, Partner or Officer of a member of any Stock Exchange, IIROC Member firm or of a Stock Exchange itself?

☐ YES ☐ NO

IF YES, WHAT IS THE NAME OF THE COMPANY(IES)? \_\_\_\_\_

Do you own, or have trading authority or an interest in another Scotia iTRADE?

☐ YES ☐ NO

IF YES, WHAT IS THE ACCOUNT NUMBER(S)? \_\_\_\_\_

Do you own, or have trading authority over any other accounts with another securities firm?

☐ YES ☐ NO

IF YES, WHAT IS THE NAME OF THE SECURITIES FIRM(S)? \_\_\_\_\_

**BANKING INFORMATION (OPTIONAL)****Please enter your primary bank account details in the white boxes below. This information can be found on most cheques.**

Your Name Your Address		Cheque No.	
		DATE _____	
PAY TO THE ORDER OF _____		\$ _____	
		_____/100 DOLLARS	
Banking Institution Name _____			
Branch Address _____			
MEMO _____			
Cheque No. ##	Branch Transit No. _____	Bank Institution No. _____	Bank Account No. _____
Type of Account <input type="checkbox"/> Chq <input type="checkbox"/> Svgs		Currency <input type="checkbox"/> CDN <input type="checkbox"/> U.S.	

CLIENT ACCOUNT NUMBER

## MARITAL STATUS

☐ SINGLE ☐ MARRIED ☐ COMMON LAW ☐ DIVORCED ☐ LEGALLY SEPARATED ☐ WIDOWED

## INFORMATION ABOUT YOUR SPOUSE

TITLE FIRST NAME INITIAL LAST NAME

### EMPLOYMENT STATUS

☐ EMPLOYED ☐ RETIRED ☐ STUDENT ☐ SELF-EMPLOYED ☐ HOMEMAKER ☐ NOT WORKING ☐ OTHER

EMPLOYER

POSITION

## IDENTIFICATION REQUIREMENTS

### TYPE OF IDENTIFICATION DOCUMENT (SELECT ONE)

☐ DRIVER'S LICENCE ☐ PROV. HEALTH INSURANCE CARD (EXCEPT ON, MB, PEI) ☐ CANADIAN CITIZENSHIP CARD ☐ BIRTH CERTIFICATE (IF UNDER AGE 21) ☐ AGE OF MAJORITY CARD ☐ PASSPORT

IDENTIFICATION DOCUMENT NUMBER

## INFORMATION ABOUT THE GUARANTOR

TITLE FIRST NAME INITIAL LAST NAME

STREET ADDRESS/LEGAL ADDRESS (ADDRESS CANNOT BE A POST OFFICE BOX)

CITY PROVINCE POSTAL CODE

Are you an existing Scotia iTRADE client? ☐ YES ☐ NO

IF YES, WHAT IS THE ACCOUNT NUMBER? \_\_\_\_\_

Do you guarantee other Scotia iTRADE accounts? ☐ YES ☐ NO

IF YES, WHAT IS THE ACCOUNT NUMBER(S)? \_\_\_\_\_

**TRADING AUTHORIZATION FORM****For Corporations, Partnerships, Associations, Sole Proprietorships and Investment Clubs****Scotia iTRADE, a division of Scotia Capital Inc.**

DATE

ACCOUNT NUMBER(S)

**Client's Legal Name:** \_\_\_\_\_**Business/Trading Style:** \_\_\_\_\_  
**(if applicable)****Terms and Conditions for Electronic Trading****"You" or "Your" refers to the client listed above. "We", "us" or "our" refers to Scotia Capital Inc. and its assigns and successors.**

By completing the appropriate Trading Authorization Form, you have authorized us to accept instructions from you, including instructions transmitted by electronic means (including automated telephone service, Internet or facsimile) which may or may not have your signature electronically transmitted. The instructions which you may give us include the purchase and sale of securities (not including facsimile), changing payment instructions on the account(s) listed above and any changes to non-financial data relating to the above account(s), so long as the change does not require supporting documentation.

We will not be liable for acting on any instructions received from a party who we, in good faith, believe to be you.

You may be required to sign additional agreements and documents in connection with any transaction you may ask us to act upon. We may send you, at our discretion, a confirmation that your instructions have been received and/or executed and any related agreements or documents.

We agree to execute your instructions in accordance with our normal procedures, although we may refuse to execute any instruction if we deem it inappropriate for any reason and we will have no liability to you on account of such refusal. We will take reasonable steps to inform you when we have determined that we will not execute any instruction. We may ask you to give us certain documents or other forms of evidence which will assist us in determining that you are the party giving the instructions. We will not be liable to you if we are unable to act upon your instructions for reasons beyond our control.

We may amend, at our discretion and without notice to you, the kinds of instructions that may be accepted. Our acceptance of your instructions is subject to receipt of appropriate authorization.

The undersigned have expressly requested that this Agreement and all deeds, documents or notices relating thereto be in the English language; les soussignés ont expressément exigé que cette convention et toute autre contrat, document ou avis afférent soient en langue anglaise.