

RBC Guaranteed Investment Funds

# Application for Registered and Non-Registered Contracts



**Please send the completed and signed application to:**

**RBC Life Insurance Company**  
c/o RBC Investor Services Trust, Shareholder Services  
155 Wellington Street West, 3rd Floor  
Toronto, ON M5V 3L3

Fax: 1-866-480-3225

For more information about this product, visit our website at  
[www.rbcinsurance.com/segregated-funds](http://www.rbcinsurance.com/segregated-funds) or call 1-877-933-4800.



**Insurance**

## COLLECTION AND USE OF PERSONAL INFORMATION

### Collecting your personal information

We (RBC Life Insurance Company) may from time to time collect information about you such as:

- Information establishing your identity (for example, name, address, phone number, date of birth, email address, etc.) and your personal background;
- Information related to or arising from your relationship with and through us;
- Information you provide through the application and claim process for any of our insurance products and services; and
- Information for the provision of products and services.

We may collect information from you, either directly or through representatives. We may collect and confirm this information during the course of our relationship. We may also obtain this information from a variety of sources including hospitals, doctors and other health care providers, the MIB, Inc., the government (including government health insurance plans) and other governmental agencies, other insurance companies, financial institutions, motor vehicle reports, and your employer.

### Using your personal information

This information may be used from time to time for the following purposes:

- To verify your identity and investigate your personal background;
- To issue and maintain insurance products and services you may request;
- To evaluate insurance risk and manage claims;
- To better understand your insurance situation;
- To determine your eligibility for insurance products and services we offer;
- To help us better understand the current and future needs of our clients;
- To communicate to you any benefit, feature and other information about products and services you have with us;
- To help us better manage our business and your relationship with us; and
- As required or permitted by law.

For these purposes, we may make this information available to our employees, our agents and service providers, and third parties, who are required to maintain the confidentiality of this information.

In the event our service provider is located outside Canada, the service provider is bound by, and the information may be disclosed in accordance with, the laws of the jurisdiction in which the service provider is located. Third parties may include other insurance companies, the MIB, Inc. and financial institutions.

We may also use this information and share it with RBC® companies (i) to manage our risks and operations and those of RBC companies, (ii) to comply with valid requests for information about you from regulators, government agencies, public bodies or other entities who have a right to issue such requests, and (iii) to let RBC companies know your choices under “Other uses of your personal information” for the sole purpose of honouring your choices.

**If we have your social insurance number, we may use it for tax related purposes and share it with the appropriate government agencies.**

*Please note the following paragraph is not applicable if this form is submitted by an independent representative or a representative that is attached to a firm other than RBC Insurance®.*

### Other uses of your personal information

- We may use this information to promote our products and services, and promote products and services of third parties we select, which may be of interest to you. We may communicate with you through various channels, including telephone, computer or mail, using the contact information you have provided.
- We may also, where not prohibited by law, share this information with RBC companies for the purpose of referring you to them or promoting to you products and services which may be of interest to you. We and RBC companies may communicate with you through various channels, including telephone, computer or mail, using the contact information you have provided. You acknowledge that as a result of such sharing they may advise us of those products or services provided.

- If you also deal with RBC companies, we may, where not prohibited by law, consolidate this information with information they have about you to allow us and any of them to manage your relationship with RBC companies and our business.

You understand that we and RBC companies are separate, affiliated corporations. RBC companies include our affiliates which are engaged in the business of providing any one or more of the following services to the public: deposits, loans and other personal financial services; credit, charge and payment card services; trust and custodial services; securities and brokerage services; and insurance services.

**You may choose not to have this information shared or used for any of these “Other uses” by contacting us as set out below, and in this event, you will not be refused insurance products or services just for that reason. We will never use or share your health information for these purposes. We will respect your choices and, as mentioned above, we may share your choices with RBC companies for the sole purpose of honouring your choices regarding “Other uses of your personal information.”**

### Your right to access your information

You may obtain access to the information we hold about you at any time and review its content and accuracy, and have it amended as appropriate; however, access may be restricted as permitted or required by law. To request access to such information, to ask questions about our privacy policies or to request that the information not be used for any or all of the purposes outlined in “Other uses of your personal information” you may do so now or at any time in the future by contacting us at:

**RBC Life Insurance Company  
P. O. Box 515, Station “A”  
Mississauga, Ontario  
L5A 4M3  
Telephone: 1-877-933-4800**

### Our privacy policies

You may obtain more information about our privacy policies by asking for a copy of our “Financial Fraud Prevention and Privacy Protection” brochure, by calling us at the toll free number shown above or by visiting our web site at [www.rbc.com/privacy](http://www.rbc.com/privacy)



Please use a fillable application.

If you use a paper application, please ensure you print clearly and firmly to avoid possible delays. Minimize processing delays by reviewing the RBC GIF New Account Reference Guide (form #89832) to ensure the appropriate forms are completed.

**Advisor Information**

- Ensure you complete your advisor and dealer information in full and accurately. Any missing information could delay the processing of the application. **For non-registered contracts: indicate how the application was completed with the client.**

**Contract Type**

- Indicate the type of Contract and complete a separate application for each Contract type.
- When applying for a LIRA, Locked-In RSP, Restricted Locked-In RSP, LIF, RLIF or PRIF ("Locked-In Contract"), you must attach the applicable supporting documentation.

**Owner Information**

- If the Owner's address is a PO Box, you will also need to indicate their civic address.
- The Owner must be a resident of Canada for tax purposes, and must be 18 years of age.**
- Owner's occupation is mandatory. Please be as specific as possible indicating the nature of business.**
- Original photo ID must be presented for recording. Expiry dates and the jurisdiction of issue must be recorded directly on the application. **DO NOT SUBMIT A PHOTOCOPY OF THE IDENTIFICATION.**
- For non-registered contracts:** Complete the Declaration of tax residency section – **MANDATORY** for all non-registered owners.
- If the owner is also the sole annuitant, the contract will end upon the death of the annuitant. In this scenario, the contract will not continue even if there is a joint owner to the contract. A death benefit will be payable unless a successor annuitant is named on the contract.

**Annuitant**

- Complete this section if the Annuitant is different than the Owner.
- The annuitant must be a resident of Canada.**
- The Contract ends on the death of the last surviving Annuitant.

**Successor Annuitant**

- A Successor Annuitant cannot be named as beneficiary (Successor annuitant is only applicable to non-registered, RIF and PRIF).

**Beneficiaries**

- If the Owner wishes the death benefit be payable to one or more of their beneficiaries in the form of a non-commutable payout annuity, please complete the **RBC GIF Beneficiary Designation and Settlement Election Form #111494** along with this application.
- The designation of an Irrevocable Beneficiary means that the Owner cannot change the beneficiary designation without the consent of the irrevocable beneficiary. The Owner must also obtain the consent of the irrevocable beneficiary to request any future transactions, including but not limited to, the redemption of funds, the assignment of the contract, or a change in the ownership of the contract. Please note that if the irrevocable beneficiary is a minor, the minor cannot provide consent for these transactions, nor can a parent, guardian or tutor acting on a minor's behalf. These consents are not required from a Revocable Beneficiary. The revocable beneficiary does not have any legal rights related to the account. Once the Owner names a new beneficiary, the previous revocable beneficiary's interest is extinguished.

**Deposits**

- All deposits must be arranged by Pre-Authorized Debit. The **Pre-Authorized Debit (PAD) Agreement** at the back of the application must be completed in full, along with a copy of the specimen cheque marked "Void". If funds are coming from another financial institution, please include copies of transfer documents and **send the forms directly to the relinquishing financial institution (we recommend you include a copy of a recent client statement of the relinquishing account).**
- If funds are being paid by a one-time withdrawal from your client's bank account, please complete the **RBC Insurance One-Time Pre-Authorized Debit (PAD) Agreement Form at the back of the application, along with a specimen cheque marked "Void"**, and submit it with this application.
- Complete all applicable questions in the Source of Funds section.

**Investment Instructions**

- Ensure you choose the correct fund number for the Funds you have chosen and the total percentages add up to 100%.

FAX completed applications to 1-866-480-3225 (retain originals until trade confirmation is received)

To obtain a status of the application, contact RBC Investor Services Trust at 1-866-372-2443 (**Advisors only**)



Advisor information (MANDATORY) Please fax the completed and signed application to: 1-866-480-3225

In this application, the terms "you" and "your" refer to the Owner or Owners. The terms "we," "our" and "us" refer to RBC Life Insurance Company (RBC Life). RBC Life is the issuer of the RBC® Guaranteed Investment Funds Contracts (the "Contracts") and the guarantor of any guarantee provisions.

MANDATORY for Non-Registered Contracts

How was this application completed with the client(s)?

- Face to Face Remotely using a screen sharing/video conference tool (Must complete the Supplementary Dual Method ID form for Cash accounts)

Name of advisor (First name, Initial, Last name), Advisor phone number, Advisor code, Dealer/agency name, Advisor/MGA office email address, Dealer code

1 Contract Owner information

A Contract Owner must be a resident of Canada for income tax purposes. In the case of REGISTERED CONTRACTS, the Owner is always the Annuitant as defined in the Income Tax Act.

You have expressly requested this application, your Contract and all related documents, including notices, be in the English language. Vous avez expressément demandé que cette demande, votre Contrat et tous documents y afférents, y compris tout avis, soient rédigés en langue anglaise. (Quebec only/ Québec seulement)

Which current, valid and original government issued photo ID are you showing to verify your AGE and IDENTITY, as required by law? MANDATORY for face to face meetings.

If meeting is done remotely, it is MANDATORY to complete form # 125096 (Supplementary Form for Dual Method authentication)

For Non-Registered Contracts: If the Owner of this contract is a Corporation or a Non-Individual Applicant (ie: corporation, trust or other organization), please complete the RBC Guaranteed Investment Funds Non-Individual form, and provide photocopies of the documents as listed on the form.

Your legal name (First name, Initial, Last name), Language Preference (English, French), Date of birth (dd/mm/yyyy), Sex (Female, Male), Social Insurance Number (SIN) or Business Number (BN), Mailing Address (number, street and apartment), City or town, Province, Postal code, Telephone number, Email address

If your mailing address above is a PO Box, General Delivery, or Rural Route, please provide your civic or street address below.

Street Address (number, street and apartment)

Your Occupation (Job title and nature of business – please be specific) (MANDATORY)

Retired checkbox

Government issued photo ID

Passport, Driver's licence, Other federal or provincial government issued valid photo ID. Please specify: Document number, Expiry date (dd/mm/yyyy), Jurisdiction of document issue: (MANDATORY) Province or Territory, Country

Declaration of tax residence (Mandatory Question for Non-Registered Contracts)

If the owner of this contract is a Corporation or a Non-Individual Applicant (ie: corporation, trust or other organization), please complete form 117444-CRS/FATCA Declaration of Tax Residence for Entities unless this is a Sole Proprietorship.

Tick (✓) all of the options that apply to you.

Are you a tax resident of any countries other than Canada? Yes No I am a tax resident or a citizen of the United States. TIN from the United States If you do not have a TIN from the United States, have you applied for one? Yes No I am a tax resident of a jurisdiction other than Canada or the United States. If you ticked this box, give your jurisdictions of tax residence and taxpayer identification numbers. If you do not have a TIN for a specific jurisdiction, give the reason using one of these choices: Reason 1: I will apply or have applied for a TIN but have not yet received it. Reason 2: My jurisdiction of tax residence does not issue TINs to its residents. Reason 3: Other reason.

For this form, "other reason" is enough. However, you still have to tell your financial institution the specific reason.

Table with 3 columns: Jurisdiction of tax residence, Taxpayer identification number, If you do not have a TIN, choose reason 1, 2 or 3.

Please detach stub before removing copies from application.

**2 What type of Contract would you like?**

Please check one (subject to availability in your province). If you would like to open more than one Contract, please complete a separate application for each Contract.

**Please obtain and read the RBC GIF Information Folder and Contract and the Fund Facts.**

- |  |   |
|--|---|
| <input type="checkbox"/> Non-Registered  | <input type="checkbox"/> Retirement Income Fund (RIF)   |
| <input type="checkbox"/> Retirement Savings Plan (RSP)   | <input type="checkbox"/> Spousal Retirement Income Fund (SRIF)  |
| <input type="checkbox"/> Spousal Retirement Savings Plan (SRSP)  | <input type="checkbox"/> Life Income Fund (LIF)   |
| <input type="checkbox"/> Restricted Locked-in Savings Plan (RLSP) <i>For Federally regulated plans only</i>              | <input type="checkbox"/> Locked-in Retirement Income Fund (LRIF)                                      |
| <input type="checkbox"/> Locked-in Retirement Savings Plan (LRSP) or Locked-in Retirement Account (LIRA)                 | <input type="checkbox"/> Prescribed Retirement Income Fund (PRIF)                                     |
| <input type="checkbox"/> If Funds are locked in, please provide the jurisdiction of the pension plan registration: _____ | <input type="checkbox"/> Restricted Life Income Fund (RLIF) <i>for Federally regulated plans only</i> |

Spousal Contributor Information

Complete this section if Spousal Retirement Savings Plan or Spousal Retirement Income Fund is chosen.

Legal name of contributing spouse or common-law partner		
First name	Initial	Last name
Contributing spouse's or common-law partner's Social Insurance Number (SIN)		Spouse's or common-law partner's date of birth (dd/mm/yyyy)

Locked-in Funds

If funds are locked-in, do you have a spouse or common-law partner within the meaning of applicable pension standards legislation?

- Yes  No

**If yes**, and you are purchasing a Life Income Fund (LIF), please provide the following information:\*

- **For Alberta:**  
A signed Pension Partner Waiver Form 10 if the funds are coming from a Locked In Retirement Account  
A signed Pension Partner Waiver Form 15 if the funds are coming directly from a pension fund
- **For British Columbia**, a signed Spousal Consent Form 3
- **For Manitoba**, a signed spousal consent form
- **For Saskatchewan** a signed Spousal Consent Form 1
- **For Nova Scotia**, a signed Spousal Consent Form 9
- **For Ontario or Newfoundland and Labrador**, your spouse or common-law partner must sign below to consent to the purchase of a Life Income Fund
- **For Federally locked in pension funds**, a signed Form 3.1 Spouse's or Common-Law Partner's Consent for the Transfer of a Pension Benefit Credit.

\* Form names and numbers were applicable at time of print, reference the pension websites for the most up to date information.

Legal name of spouse or common-law-partner		
First name	Initial	Last name
Signature of spouse or common-law-partner		Date signed (dd/mm/yyyy)

**Complete sections 3 to 6 for Non-Registered Contracts only. (MANDATORY)**

**3 Purpose of Investment**

(Check all that apply)

- Long Term Investment     Retirement Savings     Estate Planning  
 Business/Key Person Protection     Other \_\_\_\_\_

Please detach stub before removing copies from application.

**4 Will the Contract have Joint Owners?**

We will send the Contract information and future mailings to the Owner's address provided in Section 1. **Joint Ownership with right of survivorship means if one of the owners dies, and the surviving Owner is elected as successor annuitant, the surviving Owner will assume full ownership of the contract.**

4a  Yes (Please complete section 4b)  No (Proceed to section 5)

**4b Will the joint owner be the successor annuitant?**

- Yes (On death of the primary annuitant the contract continues with the joint owner as successor annuitant.)  
 No (On the death of the sole annuitant the contract will cease and a death benefit will be paid out according to the beneficiary designation on record.)

Your legal name      First name      Initial      Last name

Date of birth (dd/mm/yyyy)      Sex  Female  Male      Social Insurance Number (SIN) or Business Number (BN)

Mailing Address (number, street and apartment)  **SAME AS SECTION 1**

City or town      Province      Postal code      Telephone number

**If your mailing address above is a PO Box, General Delivery, or Rural Route, please provide your civic or street address below.**

Street Address (number, street and apartment)

**Your Occupation (Job title and nature of business – please be specific) (MANDATORY)**

Retired

Government issued photo ID

<input type="checkbox"/> Passport	<input type="checkbox"/> Driver's licence	<input type="checkbox"/> Other federal or provincial government issued valid photo ID. Please specify:
Document number	Expiry date (dd/mm/yyyy)	Jurisdiction of document issue: <b>(MANDATORY)</b> Province or Territory      Country

**Quebec only:**

- As contract owner I hereby appoint the joint owner specified in section 4b as my subrogated policy holder.  
 As joint owner I hereby appoint the contract owner specified in section 1 as my subrogated policy holder.

**Declaration of tax residence (Mandatory Question for Non-Registered Contracts)**

Tick (✓) all of the options that apply to you.

**Are you a tax resident of any countries other than Canada?**  Yes  No

**I am a tax resident or a citizen of the United States.**      TIN from the United States  
 If you ticked this box, give your taxpayer identification number (TIN) from the United States:                   
 If you do not have a TIN from the United States, have you applied for one?       Yes  No

**I am a tax resident of a jurisdiction other than Canada or the United States.**  
 If you ticked this box, give your jurisdictions of tax residence and taxpayer identification numbers.  
 If you do not have a TIN for a specific jurisdiction, give the reason using one of these choices:  
**Reason 1:** I will apply or have applied for a TIN but have not yet received it.  
**Reason 2:** My jurisdiction of tax residence does not issue TINs to its residents.  
**Reason 3:** Other reason.  
 For this form, "other reason" is enough. However, you still have to tell your financial institution the specific reason.

Jurisdiction of tax residence	Taxpayer identification number	If you do not have a TIN, choose reason 1, 2 or 3.

**5 Do you want to name a Successor Owner?**

You may name someone to succeed you as Owner of the Contract in the event of your death.

**IMPORTANT: If you want the contract to continue on the death of the owner and annuitant, you must name a successor owner and a successor annuitant.**

Yes (Please complete section below)  No

Legal name of Successor Owner      Relationship to Contract Owner  
 First name      Initial      Last name

In Quebec, a Successor Owner is called a subrogated policyholder.

**6 Is the Annuitant different from the Owner named in Section 1?**

On the death of the Annuitant, a death benefit will be payable unless a Successor Annuitant is named in Section 4 or 7.

**Mandatory question for Corporation or Non-Individual applicants. The Annuitant MUST be an individual.**

Yes (Please complete the information below)  No (Annuitant will be the same person named in section 1)

Legal name of Annuitant First name Initial Last name			Relationship to Contract Owner		
Date of birth (dd/mm/yyyy)			Sex <input type="checkbox"/> Female <input type="checkbox"/> Male		
Address (number, street and apartment)			<input type="checkbox"/> SAME AS SECTION 1		
City or town		Province		Postal code	

**7 Is there a Successor Annuitant?**

Yes (Please complete information below)  No (Proceed to next section)

**Non-Registered Contract:** If you name a Successor Annuitant, on the death of the first Annuitant, no death benefit is payable and the Contract will continue (if you are named a **joint owner complete section 4 only**).

**RIF and PRIF:** The Successor Annuitant must be your spouse or common-law partner. At the time of your death, this Contract will continue to be in force and your spouse or common-law partner will become the Owner.

Legal name of Successor Annuitant First name Initial Last name			Relationship to Contract Owner		
Date of birth (dd/mm/yyyy)	Sex <input type="checkbox"/> Female <input type="checkbox"/> Male		Social Insurance Number (SIN) or Business Number (BN)		

If permitted by law I reserve the right to revoke this election.

**8 Beneficiary Designation and Settlement Election**

The person(s) you name here will receive a death benefit on the death of the last surviving Annuitant. **A beneficiary cannot be the same as the Annuitant or Successor Annuitant. If an annuitant is designated, the death benefit will automatically default to the Owner.**

**8a ANNUITY SETTLEMENT OPTION**

In the absence of a designated beneficiary, or if the designation is Estate:

- If the owner and annuitant are different, benefits will be payable to the Owner.
- If the owner and annuitant are the same, benefits will be payable to the Annuitant's estate.

**8b** Where a primary beneficiary pre-deceases the last surviving Annuitant, the share of benefits attributed to that primary beneficiary will be distributed pro rata amongst the remaining primary beneficiaries.

**If you want the death benefit to be payable to one or more of your beneficiaries in the form of a non-commutable payout annuity, please:**

- 1) check here  and
- 2) complete the RBC Guaranteed Investment Funds Beneficiary Designation and Settlement Election form along with this application (**do not complete the beneficiary designation charts below**).

Primary beneficiary legal name(s) or corporate name	Relationship to Annuitant (in Quebec, relationship to Owner)	Share of benefits	Designation
First name Initial Last name		%	<input type="checkbox"/> Revocable <input type="checkbox"/> Irrevocable
First name Initial Last name		%	<input type="checkbox"/> Revocable <input type="checkbox"/> Irrevocable
<b>TOTAL (must equal 100%)</b>		<b>100%</b>	

If boxes are unchecked the designation will be considered revocable (except in Quebec).

Secondary beneficiary legal name(s) or corporate name A secondary beneficiary does not have any rights if a named primary beneficiary exists.	Relationship to Annuitant (in Quebec, relationship to Owner)	Share of benefits	Designation
First name Initial Last name		%	<input type="checkbox"/> Revocable <input type="checkbox"/> Irrevocable
First name Initial Last name		%	<input type="checkbox"/> Revocable <input type="checkbox"/> Irrevocable
<b>TOTAL (must equal 100%)</b>		<b>100%</b>	

If boxes are unchecked the designation will be considered revocable (except in Quebec).

**FOR QUEBEC APPLICANTS ONLY**, if you have named your spouse or civil union partner as beneficiary, the designation is irrevocable unless you check revocable here:  **REVOCABLE**

**Important: the stipulation above only applies to a married or civil union spouse and not to a common-law partner.**

Minor Beneficiary Information

**IF THE BENEFICIARY IS A MINOR:** The trustee(s) is authorized in his/her sole discretion to use the benefits under the Contract for the education or maintenance of the beneficiaries and to exercise any right of the beneficiaries under the Contract. (Please note in Quebec, significant differences exist between the rights of a tutor and a trustee. Consult your professional advisor.)

Minor Beneficiary's date of birth	Trustee's Full Name
Minor Beneficiary's date of birth	Trustee relationship to life insured
Trustee's address	

**9 Source of Funds**

**9a Are payments being made to this Contract by an individual or entity other than the Owner?**

No  Yes (Please complete information below)

**9b Contributor Information**

Legal name First name Initial Last name	Date of Birth (dd/mm/yyyy)
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Relationship to Owner	If a corporation, provide incorporation number and place of incorporation.
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Address (number, street and apartment)

City or town	Province	Postal code
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If your mailing address above is a PO Box, General Delivery, or Rural Route, please provide your civic or street address below.

Address (number, street and apartment)

**Your Occupation (job title and nature of business – please be specific) (MANDATORY)**

Retired

**10 What is your lump sum Deposit amount? Select all that apply.**

Minimum deposit amount is **\$1,000** for all Contract types except RIF, LIF, LRIF, PRIF and RLIF, where the minimum is **\$10,000**.

**For transfers, documents should be sent directly to the relinquishing institution including a copy of the last client statement. Copies of these forms should be included with this application.**

**Total amount of your initial deposit (\$)** \_\_\_\_\_

A one-time withdrawal from your bank account. Please complete the **RBC Insurance Wealth Management One-Time Pre-Authorized Debit (PAD) Agreement form at the back of the application, along with a specimen cheque marked "Void"**, and submit it with this application.

Transfer from another financial institution

Amount \_\_\_\_\_ Name of institution \_\_\_\_\_ Account number \_\_\_\_\_

Transfer from another financial institution

Amount \_\_\_\_\_ Name of institution \_\_\_\_\_ Account number \_\_\_\_\_

Transfer from another RBC Life product

Amount \_\_\_\_\_ Name of product \_\_\_\_\_ Account or policy number \_\_\_\_\_

**11 Do you want to make monthly PAD deposits?**

**For Non-Registered, RSP and SRSP Contracts Only**

The minimum amount you may deposit each month is **\$50** per Fund number.

Yes  No

**If yes, please complete and sign the PAD Agreement at the back of this application and attach a SPECIMEN personalized blank cheque marked "void".**

If the bank account is jointly owned with you, please have that person authorize the PAD plan by signing the PAD Agreement. All deposits made become the property of the Owners of the Contract, and no rights are extended to the other bank account holder.

Amount of your monthly deposit (\$)	Month of your first deposit	Date of your monthly deposit (Please specify a date from the 1 <sup>st</sup> to the 28 <sup>th</sup> )

**12 In which RBC Guaranteed Investment Funds are you investing?**

List the Fund number for the Funds you have chosen and the percentage you are allocating to each Fund. Minimum lump sum allocation is **\$1,000** per Fund number.

**\* Monthly PAD allowed only with Non-Registered, RSP and SRSP Contracts.**

Minimum monthly PAD allocation is **\$50** per Fund number.

**Subsequent lump sum deposits will require a new submission of investment instructions.**

**Please ensure the Fund numbers match the product type, fund, and sales charge option you wish to purchase. Refer to section 9 of the RBC GIF Information Folder and Contract for more details. Please refer to the inside cover of this application for Fund numbers.**

Fund number	Lump sum allocation	Monthly PAD allocation*	For Initial Sales Charge (ISC) only If the initial sales charge is not indicated, the minimum applies.
RLI	%	%	%
RLI	%	%	%
RLI	%	%	%
RLI	%	%	%
RLI	%	%	%
RLI	%	%	%
<b>Total 100%</b>		<b>Total 100%</b>	

**Mandatory for F Sales Charge (FSC)**

Advisor Fee for FSC funds (0-1.25%) \_\_\_\_\_ %

The fee will apply to all FSC funds. If the fee is not indicated, the minimum applies.

By signing here, you agree to the Advisor Fee entered above. \_\_\_\_\_

Owner(s) signature

**13 Are you setting up a Dollar-Cost Averaging (DCA) Strategy?**

No  Yes

Please provide us with your Switch Instructions:

Frequency:

Monthly

Quarterly

Day of month: \_\_\_\_\_ (Choose between 1 and 28)

Month of first switch: \_\_\_\_\_

Switch to:

Fund number	Amount of switch (\$)
RLI	
RLI	
RLI	
RLI	

If yes, funds in Section 12 must be deposited into RLI 120 if switching to Series 1 or Series 2 funds or RLI 125 if switching to Invest Series funds.

**RBC Insurance Advisors only**

RLI 160 if switching to Series 1 or Series 2 funds or RLI 165 if switching to Invest Series funds.

If you wish to make a switch other than a DCA strategy, fill out and submit the Switch change form.

**14 Scheduled Withdrawal Payments (SWP) and RIF/LIF/LRIF/PRIF/RLIF scheduled payment information**

**14a. RIF/LIF/LRIF/PRIF/RLIF scheduled payment information**

Scheduled payment Please check one:

RIF, LIF, LRIF, PRIF, RLIF **minimum**

LIF, LRIF, RLIF **maximum**

Level – client-specified amount (\$) \_\_\_\_\_  Gross  Net

If legislation permits, base the minimum annual payment on my spouse's date of birth:

Spouse's date of birth \_\_\_\_\_ **Note: if not completed we will use the owner's date of birth.**

**If you do not choose a scheduled payment option, we will send the minimum required payment.**

**For transfers to Quebec LIF**, the maximum income in the year of transfer will only be calculated if the application declaration schedule is complete.

Withholding tax rate

Federal \_\_\_\_\_% Provincial – Quebec only \_\_\_\_\_%  
(if blank or less than the required rate, we will withhold the required rate)

Additional voluntary withholding tax rate (above the required rate)

Federal \_\_\_\_\_% Provincial-Quebec only \_\_\_\_\_%

Specific Payment:

Gross Payment requested \_\_\_\_\_ Total Tax requested \_\_\_\_\_ Net Payment requested \_\_\_\_\_

**Important: For locked-in funds your payment mode will remain the same, unless we receive a request from you to change your payment selection.**

**14b. Scheduled Withdrawal Payments for Non-Registered Contracts**

**Minimum account size for Scheduled Withdrawal Payments (SWP) is \$10,000. Minimum withdrawal is \$100 per Fund.**

Gross Amount: \$ \_\_\_\_\_

**14c. Withdrawal instructions for all Scheduled Withdrawal Payments**

**List the Fund number and the percentage you are withdrawing from each Fund:**

Fund number	SWP
RLI	_____ %
RLI	_____ %
	<b>Total 100%</b>

**14d. Electronic funds transfer (EFT) payment instructions for all Scheduled Withdrawal Payments**

**Scheduled withdrawal payments will not be set up unless EFT details and a specimen cheque marked "void" are received.**

**Payment frequency**

Monthly

Quarterly

Semi-annually

Annually

**Payment start date**

Year	Month	Date (Please specify a date from the 1 <sup>st</sup> to the 28 <sup>th</sup> )
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**Bank information**

Bank Number	Bank Transit	Account Number
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**Please attach a SPECIMEN personalized blank cheque marked "Void."**

**15 Additional information**

Please note any additional information or instructions here.

## 16 Please sign here

If there is more than one Contract Owner, all Owners must sign here.

For corporations, signatures of binding officer(s) and their titles.

For trusts, all trustees must sign unless the trust agreement specifies otherwise.

**Important information is contained in the RBC GIF Information Folder and Contract and the Fund Facts and should be read prior to investing.**

### Owner Declaration

By signing below, you confirm that:

- **no other individual or entity will give directions to the policy owner(s) regarding the purchase of the Contract or receiving payments;**
- **you have reviewed or been given the opportunity to review all the sections of the completed application, if all or any sections of this application were completed using a screen sharing/video conference tool;**
- you have received a copy of the application, the RBC Guaranteed Investment Funds Information Folder and Contract and the Fund Facts, and that your advisor has explained and discussed the contents of these; and
- you have read and agree to the information in "Collection and Use of Personal Information" and "What You Understand and Agree to When You Sign This Application," which form part of this application; and
- you agree the information you provided is complete and accurate;
- you understand that the effective date of the contract will be the date shown on the confirmation notice as the effective date of the first premium deposit;
- if funds are locked-in, you hereby acknowledge having reviewed the addendum for the applicable plan in the applicable jurisdiction. This addendum forms part of your Contract;
- for Manitoba only, addendum must be signed and returned with the application.
- If you reside in the Province of Quebec, you were presented French versions of the RBC Guaranteed Investment Funds Information Folder and Contract, Funds Facts, and this application, but you expressly requested to enter into a version of the agreements drawn up exclusively in English. Therefore, you expressly agree that the agreements governing the Insurance and all related documents, including notices, be drawn up exclusively in English. Si vous habitez au Québec, on vous a remis la version française de la Notice explicative et du contrat des Fonds de placement garanti RBC, de l'aperçu des fonds et de la présente demande, mais vous avez expressément demandé de conclure les versions rédigées exclusivement en anglais de ces conventions. Par conséquent, vous acceptez expressément que les conventions régissant l'assurance et tous les documents connexes, y compris les avis, soient rédigés exclusivement en anglais.

Signature of Contract Owner	Date signed (dd/mm/yyyy)	Province
Signature of Contract Joint Owner	Date signed (dd/mm/yyyy)	Province
Signature of Annuitant (if different from Owner)	Date signed (dd/mm/yyyy)	Province
Signature of Successor Annuitant (if appointed in Section 4 or 7)	Date signed (dd/mm/yyyy)	Province

### Advisor Declaration

By signing below:

- advisors confirm that they have provided a copy, explained and discussed the contents of this application and RBC Guaranteed Investment Funds Information Folder and Contract and the Fund Facts;
- advisors confirm that they are appropriately licensed and that they will receive compensation if this application is accepted by RBC Life;
- advisors confirm that they have disclosed the following in writing to the Proposed Owner:
  - the name of the company/companies they represent;
  - that they receive commissions and/or a salary for the sale of the insurance-based investment products;
  - that they may receive bonuses or non-monetary benefits such as invitations to conferences or other incentives; and
  - any conflict of interest they may have with respect to the sale of this product; and
- **advisors confirm that if the owner identification was collected remotely, that they have followed the dual process method of identification;**
- advisors confirm that on the below date the Owner had presented original government issued photo ID to confirm their identity and that applicant's name, type of document, issuing jurisdiction and country, document number and expiry date (if applicable) were correctly transcribed from such document.
- advisors confirm that they have provided the "Principles for the Sale of Insurance" document to applicants residing in the province of Newfoundland and Labrador.
- If an error is made (such as NSF payments or incorrect or incomplete instructions), we reserve the right to charge your client for any expenses or investment losses that occur as a result of the error.
- If this application is faxed to RBC Investor Services Trust, you agree to NOT mail the original application. **Should any duplication of transactions occur as a result of a fax and original being submitted, you the advisor will be responsible for any resulting costs for the reversal of the transaction (if applicable).** We have the right to request the original application in the event the fax is not clear.
- With respect to clients who reside in the province of Quebec, advisors confirm that they presented to the client(s) French versions of the RBC Guaranteed Investment Funds Information Folder and Contract, Funds Facts, and this application, but the client(s) expressly requested to enter into a version of the agreements drawn up exclusively in English.

Signature of advisor	Date signed (dd/mm/yyyy)
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# Pre-Authorized Debit (PAD) Agreement

(Do not fill out this form if the one time pre-authorized payment option was elected in section 11. The One Time PAD agreement form is required instead.)

Ensure you read and understand the section "Collection and Use of Personal Information."

The Payor(s) named below agrees that:

1. a) RBC Life Insurance Company (RBC Life) is authorized to make scheduled withdrawals to pay the deposits for this Contract in accordance with the deposit schedule set out in this Contract, including the initial deposit, if requested in this Application, from the account at the financial institution below, or any other financial institution that the Payor(s) may later designate.
- b) **RBC Life is not required to provide notification before the initial deposit is debited, or if the amount of withdrawal should vary.**
- c) Unless otherwise indicated in the Special Requests section below, such withdrawals shall be dated on the day of the month on which the deposit is due under the Contract or, if more than one Contract is included in this Agreement, the withdrawals shall be dated to coincide with the existing Contract(s).
- d) The financial institution indicated below is authorized now or at any subsequent time to honour any requests made by RBC Life to withdraw from the account indicated below, which may include a redraw within 30 days should any withdrawal not clear the account.
- e) Notification of any change to the account information provided below shall be given to RBC Life by the Payor(s) a minimum of 20 days prior to the next scheduled withdrawal. The Payor(s) agrees that from time to time they may authorize RBC Life to deduct such payments from another account upon the Payor's written instructions.
- f) This Agreement will terminate in respect of all Contracts included in it upon 20 days written notice by RBC Life or by the Payor(s). The Payor(s) may obtain further information on their right to cancel a PAD Agreement by visiting the Canadian Payments Association website at [www.cdnpay.ca](http://www.cdnpay.ca)
- g) In the event that a PAD is disputed, the Payor(s) agrees to contact RBC Life. For recourse purposes, this PAD is considered a Personal PAD.  
The Payor(s) has certain recourse rights if any debits do not comply with this agreement. For example, the Payor(s) has the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement. To obtain more information on recourse rights, the Payor(s) may contact their financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca)
- h) The names and signatures of all persons required to authorize withdrawals from the account indicated are included below.

2. Add to existing PAD with Contract number(s) \_\_\_\_\_

3. Special requests (withdrawals are limited between the 1<sup>st</sup> and 28<sup>th</sup> of the month) \_\_\_\_\_

## Bank Information

**Please attach a SPECIMEN personalized blank cheque marked "Void" (a line of credit account cannot be used).**

Name of bank or financial institution	Transit Number	Bank Number	Account Number
---------------------------------------	----------------	-------------	----------------

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_  
(City/Province) (Month/Year)

Print name of Payor (account holder)	Print name of Second Payor (account holder) (if any)
Signature of Payor	Signature of Second Payor (if any)

Please detach stub before removing copies from application.

RBC Insurance® Wealth Management  
 One-Time Pre-Authorized Debit (PAD)  
 Agreement



Insurance

**FOR HEAD OFFICE USE ONLY. ACTION: BUY WITH EFT SETTLEMENT**

By completing and signing this one-time PAD Agreement, the Payor(s) named below agrees that:

- RBC Life Insurance Company (RBC Life) is authorized to make a one-time withdrawal in the amount of \$ \_\_\_\_\_ to pay the lump sum deposit according to your investment instructions as indicated on your deposit request for a  
 new account \_\_\_\_\_  existing account \_\_\_\_\_.
- By signing this Agreement, you give RBC Life permission to debit the account held at the financial institution indicated below.

**Bank Information**

Please attach a SPECIMEN personalized blank cheque marked "Void" (a line of credit account cannot be used).

Name of Bank or Financial Institution	Transit Number	Bank Number	Account Number
Address			
City	Province	Postal Code	

**You agree that:**

- The one-time PAD will be withdrawn on the day it is received by RBC Life or when all requirements for your deposit request have been received in good order. RBC Life is not required to provide notification before the requested deposit amount is debited and assumes funds are available as of the date this one-time PAD is received. The Payor(s) agree to waive any pre-notification requirements that may apply to any debit. This means the parties accept that notice will not be provided before the due date of any PAD.
- This Agreement is for a single transaction only for the amount indicated above and will terminate upon the one-time PAD being withdrawn from the account above. This Agreement does not provide authorization for any additional unrelated debits to your account. Any additional debits will require that you execute an additional PAD Agreement. This Agreement may be cancelled upon notice being provided by the Payor(s), either in writing or orally with proper authorization to verify the identity of the person, within 30 days before the PAD is to be issued. In order to cancel this Agreement, you must provide written notice.
- The financial institution indicated above is authorized to honour this request made by RBC Life to withdraw from the account indicated above. If your payment is returned to us marked NSF (non-sufficient funds), we reserve the right under our Administrative Rules to charge a fee to you in addition to the amount indicated above.
- In the event that this one-time PAD Agreement is disputed, the Payor(s) agrees to contact RBC Life. For recourse purposes, this one-time PAD Agreement is considered a Personal PAD.
- The Payor(s) has certain recourse rights if any debits do not comply with this Agreement. For example, the Payor(s) has the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement. To obtain more information on recourse rights, the Payor(s) may contact their financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).
- The names and signatures of all persons required to authorize withdrawals from the account indicated are included below.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_  
 (City/Province) (Month/Year)

Print name of Payor (account holder)	Print name of Second Payor (account holder) (if any)
Signature of Payor	Signature of Second Payor (if any)

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 VPS110211

Please detach stub before removing copies from application.

## Invest Series Funds and Fund Codes Offered in RBC GIF as of May 2023

Asset class	Fund name – Invest Series (75/75)	ISC	CBO	FSC	RBC Insurance FS Advisors Only
Money Market	RBC Canadian Money Market GIF*	RLI 125	RLI 115A	RLI 125F	RLI 165
Fixed Income	RBC Canadian Short-Term Income GIF	RLI 225	-	-	RLI 265
	RBC Bond GIF	RLI 325	RLI 315A	RLI 325F	RLI 365
	RBC PH&N Total Return Bond GIF	RLI 2525	RLI 2515A	RLI 2525F	RLI 2565
	RBC Global Bond GIF	RLI 1725	RLI 1715A	RLI 1725F	RLI 1765
	RBC BlueBay Global Convertible Bond GIF (Canada)	RLI 2925	-	-	RLI 2965
	RBC High Yield Bond GIF	RLI 2825	-	-	RLI 2865
Balanced	RBC Balanced GIF	RLI 425	RLI 415A	RLI 425F	RLI 465
	RBC Vision Balanced GIF	RLI 4125	RLI 4115A	-	RLI 4165
	RBC Conservative Growth & Income GIF	RLI 3325	RLI 3315A	RLI 3325F	RLI 3365
	RBC Balanced Growth & Income GIF	RLI 3025	RLI 3015A	RLI 3025F	RLI 3065
	RBC Global Growth & Income GIF	RLI 3425	RLI 3415A	RLI 3425F	RLI 3465
	RBC PH&N Monthly Income GIF	RLI 2425	RLI 2415A	RLI 2425F	RLI 2465
	RBC Global Balanced GIF	RLI 1925	RLI 1915A	RLI 1925F	RLI 1965
Portfolio Solutions	RBC Select Conservative GIP**	RLI 1425	RLI 1415A	RLI 1425F	RLI 1465
	RBC Select Balanced GIP	RLI 1325	RLI 1315A	RLI 1325F	RLI 1365
	RBC Select Growth GIP	RLI 1525	RLI 1515A	RLI 1525F	RLI 1565
	RBC Select Aggressive Growth GIP	RLI 1625	RLI 1615A	RLI 1625F	RLI 1665
Global Portfolio Solutions	RBC Global Conservative GIP	RLI 3625	RLI 3615A	RLI 3625F	RLI 3665
	RBC Global Balanced GIP	RLI 3525	RLI 3515A	RLI 3525F	RLI 3565
	RBC Global Growth GIP	RLI 3725	RLI 3715A	RLI 3725F	RLI 3765
	RBC Global All-Equity GIP	RLI 3825	RLI 3815A	RLI 3825F	RLI 3865
Canadian Equity	RBC Canadian Dividend GIF	RLI 525	RLI 515A	RLI 525F	RLI 565
	RBC Canadian Equity GIF	RLI 625	RLI 615A	RLI 625F	RLI 665
	RBC Vision Canadian Equity GIF	RLI 4225	RLI 4215A	-	RLI 4265
	RBC O'Shaughnessy All-Canadian Equity GIF	RLI 2025	-	-	RLI 2065
	RBC PH&N Canadian Income GIF	RLI 2625	-	-	RLI 2665
North American Equity	RBC North American Value GIF	RLI 2725	RLI 2715A	RLI 2725F	RLI 2765
	RBC North American Growth GIF	RLI 725	RLI 715A	RLI 725F	RLI 765
U.S. Equity	RBC U.S. Dividend GIF	RLI 1825	RLI 1815A	RLI 1825F	RLI 1865
	RBC U.S. Equity GIF	RLI 825	RLI 815A	RLI 825F	RLI 865
	RBC QUBE Low Volatility US Equity GIF	RLI 3925	RLI 3915A	RLI 3925F	RLI 3965
	RBC O'Shaughnessy U.S. Value GIF	RLI 925	-	-	RLI 965
International and Global Equity	RBC O'Shaughnessy International Equity GIF	RLI 1225	-	-	RLI 1265
	RBC Emerging Markets Dividend GIF	RLI 3225	RLI 3215A	RLI 3225F	RLI 3265
	RBC Global Dividend Growth GIF	RLI 1125	RLI 1115A	RLI 1125F	RLI 1165
	RBC Global Equity GIF	RLI 3125	RLI 3115A	RLI 3125F	RLI 3165
	RBC QUBE Low Volatility Global Equity GIF	RLI 4025	RLI 4015A	RLI 4025F	RLI 4065

## Series 1 Funds and Fund Codes Offered in RBC GIF as of May 2023

Asset class	Fund name – Series 1 (75/100)	ISC	CBO	FSC	RBC Insurance FS Advisors Only
<b>Money Market</b>	RBC Canadian Money Market GIF*	RLI 120	RLI 110A	RLI 120F	RLI 160
<b>Fixed Income</b>	RBC Canadian Short-Term Income GIF	RLI 220	-	-	RLI 260
	RBC Bond GIF	RLI 320	RLI 310A	RLI 320F	RLI 360
	RBC PH&N Total Return Bond GIF	RLI 2520	RLI 2510A	RLI 2520F	RLI 2560
	RBC Global Bond GIF	RLI 1720	RLI 1710A	RLI 1720F	RLI 1760
	RBC High Yield Bond GIF	RLI 2820	-	-	RLI 2860
<b>Balanced</b>	RBC Balanced GIF	RLI 420	RLI 410A	RLI 420F	RLI 460
	RBC Vision Balanced GIF	RLI 4120	RLI 4110A	-	RLI 4160
	RBC Conservative Growth & Income GIF	RLI 3320	RLI 3310A	RLI 3320F	RLI 3360
	RBC Balanced Growth & Income GIF	RLI 3020	RLI 3010A	RLI 3020F	RLI 3060
	RBC Global Growth & Income GIF	RLI 3420	RLI 3410A	RLI 3420F	RLI 3460
	RBC PH&N Monthly Income GIF	RLI 2420	RLI 2410A	RLI 2420F	RLI 2460
<b>Portfolio Solutions</b>	RBC Global Balanced GIF	RLI 1920	RLI 1910A	RLI 1920F	RLI 1960
	RBC Select Conservative GIP**	RLI 1420	RLI 1410A	RLI 1420F	RLI 1460
	RBC Select Balanced GIP	RLI 1320	RLI 1310A	RLI 1320F	RLI 1360
	RBC Select Growth GIP	RLI 1520	RLI 1510A	RLI 1520F	RLI 1560
	RBC Select Aggressive Growth GIP	RLI 1620	RLI 1610A	RLI 1620F	RLI 1660
<b>Global Portfolio Solutions</b>	RBC Global Conservative GIP	RLI 3620	RLI 3610A	RLI 3620F	RLI 3660
	RBC Global Balanced GIP	RLI 3520	RLI 3510A	RLI 3520F	RLI 3560
	RBC Global Growth GIP	RLI 3720	RLI 3710A	RLI 3720F	RLI 3760
	RBC Global All-Equity GIP	RLI 3820	RLI 3810A	RLI 3820F	RLI 3860
<b>Canadian Equity</b>	RBC Canadian Dividend GIF	RLI 520	RLI 510A	RLI 520F	RLI 560
	RBC Canadian Equity GIF	RLI 620	RLI 610A	RLI 620F	RLI 660
	RBC Vision Canadian Equity GIF	RLI 4220	RLI 4210A	-	RLI 4260
	RBC O'Shaughnessy All-Canadian Equity GIF	RLI 2020	-	-	RLI 2060
	RBC PH&N Canadian Income GIF	RLI 2620	-	-	RLI 2660
<b>North American Equity</b>	RBC North American Value GIF	RLI 2720	RLI 2710A	RLI 2720F	RLI 2760
	RBC North American Growth GIF	RLI 720	RLI 710A	RLI 720F	RLI 760
<b>U.S. Equity</b>	RBC U.S. Dividend GIF	RLI 1820	RLI 1810A	RLI 1820F	RLI 1860
	RBC U.S. Equity GIF	RLI 820	RLI 810A	RLI 820F	RLI 860
	RBC QUBE Low Volatility US Equity GIF	RLI 3920	RLI 3910A	RLI 3920F	RLI 3960
	RBC O'Shaughnessy U.S. Value GIF	RLI 920	-	-	RLI 960
<b>International and Global Equity</b>	RBC O'Shaughnessy International Equity GIF	RLI 1220	-	-	RLI 1260
	RBC Global Dividend Growth GIF	RLI 1120	RLI 1110A	RLI 1120F	RLI 1160
	RBC QUBE Low Volatility Global Equity GIF	RLI 4020	RLI 4010A	RLI 4020F	RLI 4060

## Series 2 Funds and Fund Codes Offered in RBC GIF as of May 2023

Asset class	Fund name – Series 2 (75/100 with Resets)	ISC	CBO	FSC	RBC Insurance FS Advisors Only
<b>Fixed Income</b>	RBC Canadian Money Market GIF*	RLI 150	RLI 140A	RLI 150F	RLI 170
	RBC Canadian Short-Term Income GIF	RLI 250	-	-	RLI 270
	RBC Bond GIF	RLI 350	RLI 340A	RLI 350F	RLI 370
	RBC PH&N Total Return Bond GIF	RLI 2550	RLI 2540A	RLI 2550F	RLI 2570
	RBC Global Bond GIF	RLI 1750	RLI 1740A	RLI 1750F	RLI 1770
<b>Balanced</b>	RBC Balanced GIF	RLI 450	RLI 440A	RLI 450F	RLI 470
	RBC Vision Balanced GIF	RLI 4150	RLI 4140A	-	RLI 4170
	RBC Conservative Growth & Income GIF	RLI 3350	RLI 3340A	RLI 3350F	RLI 3370
	RBC Balanced Growth & Income GIF	RLI 3050	RLI 3040A	RLI 3050F	RLI 3070
	RBC Global Growth & Income GIF	RLI 3450	RLI 3440A	RLI 3450F	RLI 3470
	RBC PH&N Monthly Income GIF	RLI 2450	RLI 2440A	RLI 2450F	RLI 2470
<b>Portfolio Solutions</b>	RBC Global Balanced GIF	RLI 1950	RLI 1940A	RLI 1950F	RLI 1970
	RBC Select Conservative GIP**	RLI 1450	RLI 1440A	RLI 1450F	RLI 1470
	RBC Select Balanced GIP	RLI 1350	RLI 1340A	RLI 1350F	RLI 1370
	RBC Select Growth GIP	RLI 1550	RLI 1540A	RLI 1550F	RLI 1570
<b>Global Portfolio Solutions</b>	RBC Select Aggressive Growth GIP	RLI 1650	RLI 1640A	RLI 1650F	RLI 1670
	RBC Global Conservative GIP	RLI 3650	RLI 3640A	RLI 3650F	RLI 3670
	RBC Global Balanced GIP	RLI 3550	RLI 3540A	RLI 3550F	RLI 3570
	RBC Global Growth GIP	RLI 3750	RLI 3740A	RLI 3750F	RLI 3770
	RBC Global All-Equity GIP	RLI 3850	RLI 3840A	RLI 3850F	RLI 3870

\* GIF refers to Guaranteed Investment Fund.

\*\* GIP refers to Guaranteed Investment Portfolio.

## WHAT YOU UNDERSTAND AND AGREE TO WHEN YOU SIGN THIS APPLICATION

### Your signature in the later pages of this application confirms that:

- You have reviewed your investment objectives and risk profile with your advisor and agree that the Fund(s) chosen are suitable within the context of your overall investment portfolio;
- You are applying for an RBC Guaranteed Investment Funds variable annuity contract, the information you have provided in this application is complete and accurate, and you will notify us if any of the information changes;
- You will notify your advisor or RBC Life Insurance Company (RBC Life) of any changes to the information you have provided for the duration of this contract;
- If you are applying for a registered Contract, you have asked us to register it under the *Income Tax Act (Canada)* and any applicable provincial income tax legislation;
- You understand that your Contract will be effective on the Valuation Date by which we have both (a) received your first Deposit, and (b) determined that the initial set-up criteria for your Contract have been met. We will send you a confirmation notice of the effective date of your Contract;
- Your Contract does not provide a guaranteed rate of return or a guarantee of the value of any payment made at a time other than the deposit maturity date, contract maturity date or upon death of the Annuitant. Unit values and the market value of your Contract for any other payment will increase or decrease in value according to the fluctuations in the market value of the assets of the Funds;
- For RSP and Non-Registered accounts, if you have indicated on the application that you want to make regular deposits, using a monthly Pre-Authorized Debit (PAD) plan, (a) you authorize the bank or other financial institution you have named to honour your instructions, and RBC Life is authorized to make withdrawals to pay for regular deposits to your Contract in accordance with your instructions in the application, (b) you or RBC Life may terminate a PAD plan by

giving 20 days' written notice, beginning on the date the notice is mailed, and (c) the signatures of all persons whose signatures are required to authorize withdrawals from the account are included in the application;

- If you have indicated in the deposit section that monies are coming from another RBC Insurance® policy, your signature constitutes authorization to withdraw the monies as described in that section;

#### ■ If this Contract is purchased from an RBC Insurance Field Sales Advisor:

You have been advised that the advisor in the transaction is a licensed life insurance advisor for RBC Life Insurance Company. If you choose to purchase a product through this advisor, the successful completion of this transaction may contribute to the advisor's eligibility to receive compensation in the form of commission, bonuses and attendance at a business conference. There is no condition associated with this transaction that requires you to transact additional or other business with RBC Life Insurance Company. You have been advised of any Conflicts of interest: that the advisor takes the responsibility of a conflict of interest seriously, that it is the advisor's duty to disclose any conflicts of interest to you as a client. You have also been advised that the overall recommendation provided takes into consideration and is based on the analysis and assessment of your insurance/investment needs;

- We are authorized to accept instructions that you have provided to your advisor under a **Limited Trading Authority** from your advisor to execute financial and non-financial transactions, including but not limited to purchases, redemptions, switches and resets, in accordance with your instructions and the Contract provisions;
- We are authorized to deliver your Contract and any other documents to your dealer or advisor;
- By providing direct deposit information, you are authorizing RBC Life to deposit scheduled payments due from your Contract into the bank account indicated. RBC Life will have no further liability with respect to these payments

and may at any time discontinue direct deposit of scheduled payments and start issuing cheques payable to you;

- You understand that an irrevocable beneficiary designation will limit certain rights you have under your Contract unless you receive written consent from the beneficiary. A parent, guardian or tutor cannot provide consent on behalf of a minor who has been named as irrevocable beneficiary;
- For a LIRA, Locked-in RSP, RLSP, LIF, LRIF or RLIF, the rights of a beneficiary may be restricted as set out in your Contract or locking-in endorsement;
- Pursuant to Section 90 of the *Financial Institutions Act* of British Columbia, the financial product you are being offered is supplied by RBC Life Insurance Company, a company licensed to carry on business in British Columbia, and your advisor represents that (a) he/she is acting as a licensed insurance representative on behalf of RBC Life, (b) he/she will be entitled to receive commission from RBC Life on successful completion of this transaction, (c) the commission may take the form of an acquisition commission and/or an ongoing service commission, and (d) there is no condition associated with this transaction requiring that you must transact additional or other business with either your advisor or RBC Life;
- You have read the section entitled "Collection and Use of Personal Information" in this application and understand and agree to its terms; and
- You may discuss any questions or concerns you may have by contacting your advisor or our Correspondence Office. More information about our complaint resolution procedures is available on the Internet at [www.rbcinsurance.com](http://www.rbcinsurance.com).

For more information regarding  
RBC Guaranteed Investment Funds,  
please speak with your advisor.



Insurance