

#### **INSTRUCTION**

Once you have finished and you are ready to continue with your electronic signature tool, please use the Finalize! button for the electronic signature.



## NOTE FOR THE AGENT

### You must:

- Produce 3 copies of this application
- Keep a copy for your files
- Send the original copy to head office
- Give a copy to the client

#### **REQUIRED DOCUMENTS**

#### If applicable, you must send the following documents with this application:

- The investor profile for each Applicant if Fund Units are credited to the Contract
- Copy of the transfer form (you must send the original directly to the other institution)
- For non-registered contracts, you must include any other mandatory documents, if required. For example:
- The F51-208A Confirmation of Identity form, if applicable;
- Recent company resolution (F51-312A) and confirmation of authorized signatories;
- Other documents required for a trust, mandate, guardianship, liquidation of estate, curatorship or administration





# IAG SAVINGS AND RETIREMENT PLAN APPLICATION INDIVIDUAL VARIABLE ANNUITY CONTRACT

	F17A	
NP		

Contract No.			

NP
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		APPLICATION
1- Type of Contract		
If the Contract is held in a Nominee or Intermediary Account, it must be administered through the Fundserv network.	Held: in Client Name, OR in a:  Nominee Account — Name of the Nominee: Intermediary Account — Name of the Intermediary:	
2- Type of Registration		
Must be completed for all Contracts. If a Contract is registered externally and held in a Nominee or an Intermediary Account, it will be considered to be a non-registered contract by Industrial Alliance Insurance and Financial Services Inc. However, please specify the type of registration with the Nominee or Intermediary.  When applying for a LIRA, Locked-In RSP, Restricted Locked-In RSP, LIF, RLIF or PRIF ("Locked-In Contract"), you must attach supporting documentation in the following cases: transfer from another institution or a pension, death of spouse or marriage breakdown; also attach the spousal consent if required when transferring a LIRA to a LIF.	Retirement Savings Plan (RSP)  Spousal RSP  Non-registered  Retirement Income Fund (RIF)*  Locked-In Retirement Account (LIRA)*  Retirement jurisdiction:  Locked-In RSP*  Life Income Fund (LIF)*  Restricted Locked-In RSP**  Restricted Life Income Fund (RLIF)**  Prescribed Retirement Income Fund (PRIF)***  QROPS qualifying RSP****	Subject to the terms of the applicable endorsement     For locked-in funds under federal legislation only     For Saskatchewan and Manitoba only     **** To apply for a Qualifying Recognised Overseas     Pension Scheme (QROPS) contract, you must be at least 55 years of age.
3- Annuitant		
The Annuitant is the Applicant for all registered Contract types. For a non-registered Contract, you must complete sections 8, 9, 10 and 11.  If the Contract is held in a Registered Nominee or Intermediary Account, the Annuitant is automatically the Registered Nominee or Intermediary Account holder. The "Principal occupation or business" field is mandatory for a non-registered contract. Be specific. Generic terms such as "manager" or "holding company" are not sufficient.	Address: Number, street	Last name:  Y M D Date of birth:  French Email:  Apt., PO Box  Province  Postal code  Employer:
4- Spousal Contribution		
For RSP and RIF contracts only.  By opening a spousal RRSP, it is the spousal contributor who will benefit from the RRSP deduction.  5- Life Insurance Agent	First name:SIN (mandatory):	Last name:  Y M D Date of birth:
Agency	Agency code: Name of district or agency:	
Primary agent Important – Agent code must be active.	Fundserv code: Sales rep.:  OR  Agent code: Sules rep.: SU: A	Dealer:gent (commissions and service): % of commission%  Email:
Secondary agent Only one agent is authorized for contracts administered through the Fundserv network. Important – Agent code must be active.	Agent code: SU: Agent code: Ag	gent (commissions only): % of commission%

6- Beneficiaries		
Beneficiaries  Do not complete if the Contract is held in a Registered Nominee or Intermediary Account.  Notwithstanding any other Beneficiary designation, for a Contract held in client name and if the Applicant acts as mandatory, trustee, tutor or guardian, the Beneficiary of the Contract is the legal heir. However, if the Contract is held in a Registered Nominee or Intermediary Account, the Beneficiary of the Contract is automatically the trustee of the Registered Nominee or Intermediary Account for the benefit of the holder of the Registered Nominee or Intermediary Account.  Notes:  — Quebec residents: If you name your spouse or civil union spouse as Beneficiary, the designation is considered irrevocable unless you check the box indicating that it is to be revocable.  — Your spouse may be automatically entitled to benefits under a LIRA, a LIF or any other Locked-In Contracts (see Section 2) notwithstanding the Beneficiary designation.	2. First name:    Y	Last name:
Contingent Beneficiary  The rights of a Contingent Beneficiary (Subrogated Beneficiary in Quebec) come into force only in the event that all primary beneficiaries have died before the Annuitant or if they have renounced to their rights as primary beneficiaries. A Contingent Beneficiary (Subrogated Beneficiary in Quebec) remains revocable.	1	ender         Date of birth         Percentage           Female         Y         M         D           Male         Y         M         D           Female         Y         M         D           Male         Y         M         D
Trustee for minor Beneficiary  Not applicable where Quebec laws apply.  If a trustee is appointed, any death benefit to be paid under the Contract to the minor Beneficiary who, at the time payment is to be made, is a minor, will be paid to the trustee, in trust for the minor Beneficiary. The trust for any minor Beneficiary will terminate once the Beneficiary is of age of majority. Before completing the section, please consult your legal advisor.	Name of minor Beneficiary  Date of birth  Y M D Y M D Y M D Y M D I I I I I I I I I I I I I I I I I I	Name of trustee Relationship to minor
7- Designation of a Successor Annu  If a Successor Annuitant is designated, on the Annuitant's death, the Contract remains in force and no death benefit is payable to the Beneficiaries or the estate.  If the Annuitant is also the Annuigant and a Successor.	First name:  Output  Date of birth:	Last name:
<ul> <li>If the Annuitant is also the Applicant and a Successor Annuitant is designated, the Successor Annuitant shall become the Applicant on the Annuitant's death, unless there is a Co-Applicant or a Subrogated Applicant is designated.</li> <li>For a registered plan, only the spouse or common-law partner can be designated. Moreover, the designation is not applicable while this Contract is registered as an RRSP/LIRA/LRSP and will only become applicable when it is converted into a RRIF/LIF. If the intention is to roll over to spouse at the RRSP/LIRA/LRSP stage, you must designate him/her as the sole beneficiary of the Contract also.</li> </ul>	Relationship to the Annuitant*:* Must be the spouse or common-law partner for a registered plan	

NON-REGISTERED CONTRACTS ON or an intermediary account.	LY. Sections 8, 9, 10 and 11 apply to non-registered contracts and contracts held in a nominee				
8- Information Required under the for a Non-Registered Contract	Proceeds of Crime (Money Laundering) and Terrorist Financing Act and Regulations				
Mandatory  You must answer all of the following questions before continuing to section 9.	What is the purpose and intended nature of the business relationship?  Retirement savings Savings for vehicle purchase Savings for real estate purchase Savings for commercial equipment Savings for other purposes (be specific):  Describe the source of funds used for this application:  Employment income Business Income Investments Pension Savings  Inheritance Other (be specific):  Is the Applicant or the Co-applicant (if any) a corporation, partnership, trust or other type of entity?				
	NO YES If "YES", each applicant must complete and sign form F51-208A and attach it to this application.  Is the Applicant or the Co-applicant (if any) acting on behalf of a third party? (Examples: Is he/she acting on the instructions of an undisclosed individual or entity; will a third party contribute funds to this Contract; is there a Power of Attorney?)  NO YES If "YES", each applicant must complete and sign form F51-208A and attach it to this application.  Is there a lump sum payment of \$100,000 or more with this application? (This includes proceeds from an investment loan)  NO YES If "YES", each applicant must complete and sign form F51-208A-1 and attach it to this application.				
	Based on projections, is it conceivable that iA Financial Group could return a cumulative amount of \$100,000 or more to the Applicant or Co-applicant?  NO YES If "YES", each applicant must complete and sign form F51-208A-1 and attach it to this application.				
9- Applicant					
If the Contract is registered externally and held in a Registered Nominee or Intermediary Account, the Applicant is automatically the trustee of the Registered Nominee or Intermediary Account.	Is the Applicant the same person as the Annuitant?  YES If "YES", you must complete only sections 9b and 9c.  NO If "NO", then for an individual Applicant you must complete sections 9a, 9b, and 9c. If the Applicant is a corporation or any other entity, you must complete section 9a, and a duly completed F51-208A form must be signed and attached to this application.				
9a- Information about the Applican	ıt erine				
The "Principal occupation or business" field is mandatory.  Be specific. Generic terms such as "manager" or "holding company" are not sufficient.	☐ Individual     ☐ Corporation     ☐ Partnership     ☐ Trust     ☐ Not-for-profit organization       ☐ Other (be specific):				
	SIN (mandatory): Date of birth: Date of birth: Tel. (home): ext ext Cell.: Cell.: Address:				
	Number, street Apt., PO Box				
	City Province Postal code  Principal occupation: Employer:				
9b- Confirmation of Identity of Indi	vidual Applicant				
First identification document for the Applicant (in person or remotely)	A Caution: Cannot be a municipal identification document.				
Caution: Must include a photo as well as name and date of birth. (Use an authentic, valid and government-issued photo identification that is consistent and shares all characteristics with an original, credible and reliable document issued by the appropriate authority.)  Example: Federal, provincial or territorial government.	Type of document:  Document number:  Country of issue:  Y M D Expiry date:    Y M D Date identity confirmed:   Y M D D D D D D D D D D D D D D D D D D				
Second identification document for the Applicant for remote identification  Caution: Identification document must have the name and address.	<ul> <li>Caution: • A provincial health insurance card cannot be accepted for identification purposes if prohibited by provincial law (e.g.: in Ontario, Manitoba and Prince Edward Island).</li> <li>• A document issued by iA Financial Group cannot be accepted.</li> </ul>				
<b>Example:</b> Notice of assessment — Insurance document (residence, vehicle, life, etc.) — Utility statement (electricity, water, telecommunications, etc.) — Property tax statement — Personalized cheque with name and address — Statement from a financial institution (loan, account balance, etc.) — Investment statement (RRSP, TFSA, RESP, etc.) — Government statement (benefits, income taxes, pension, etc.)	Type of document: Document number:  Name of issuing organization:  Y M D  Date identity confirmed: I   I   I				

9c- Tax Status of Individual Applica	ant				
Mandatory These questions are required in compliance with the Common Reporting Standard (CRS) and the U.S. Foreign Account Tax Compliance Act (FATCA).	— Is the Applicant a tax resident or a citizen of the United States?  NO YES  If "YES", indicate the U.S. Taxpayer Identification Number (TIN) or Social Security Number (SSN):				
	<ul> <li>Is the Applicant a tax resident in a jurisdiction other to NO YES</li> <li>If "YES", specify the jurisdiction(s) of tax residence at the reason. Use an additional sheet of paper if neces</li> </ul>	and Taxpayer Identification Number(s) (TIN). If no TIN is available, please give			
	Jurisdiction of tax residence:	Tax Identification Number:			
	Jurisdiction of tax residence:	Tax Identification Number:			
	Reason for no TIN (if applicable):				

Top	You must complete all information required for the Co-Applicant in sections 10a, 10b and 10c.	<ol> <li>For all provinces and territories except Quebec: by designating a Co-Applicant, the Applicant and the Co-Applicant acknowledge and consent that the type of ownership is qualified as "joint ownership WITH rights of survivorship." Upon the death of the Applicant or the Co-Applicant who is not the Annuitant, his/her rights and obligations pursuant to the Contract pass automatically to the other.</li> <li>For province of Quebec only: by designating a Co-Applicant, the Applicant and the Co-Applicant acknowledge and agree that they respectively designate each other as Co-Applicant and Subrogated Applicant of the Contract (this does not apply if a third-party Subrogated Applicant has been designated in section 11). Upon the death of the Applicant or the Co-Applicant who is not the Annuitant, they understand that the deceased's rights and obligations pursuant to the Contract pass automatically to the Subrogated Applicant.</li> </ol>						
Second identification document for the Co-Applicant content and affects.   Second colorest found in content and affects.   Second colorest found in colore	10a- Information about the Co-App	licant						
SN /mandatory:	The "Principal occupation or business" field is mandatory.	First name: Last na	me or full name of entity:					
Iel   offices			Date of birth:					
Iel   offices		Tel. (home):	Email:					
Address:  Number, street								
Number, stroot:    Number, stroot:   Province   Postal code			Cell.:					
Time   Confirmation of Identity of Individual Co-Applicant   Type of document for the Co-Applicant and shares all characteristics with an original, reporting and intaliable document issued by the appropriate authority.   Type of document   Country of issue   Country of i			Apt., PO Box					
The confirmation of Identity of Individual Co-Applicant First identification document for the Co-Applicant (in person or remotely)		City	Province Postal code					
A Caution: Cannot be a municipal identification document (in person or remotely)  A Mandatory Caution: Must include a photo as well as name and date of thirt, (Usa a nuthentic, valid and government-issued photo identification that is consistent and shares all characteristics with an original, credible and reliable document issued by the appropriate auditority)  Example: Federal, provincial or territorial government.  Second identification document for the Co-Applicant for remote identification Caution: Identification document for the Co-Applicant have the name and address.  Example: Note of assessment – Insurance document (residence, whick), life, etc.) — Utility statement (festionic, whick), life, etc.) — Utility statement of (residence, whick), life, etc.) — Utility statement of (residence, whick), life, etc.) — Covernment statement (PRSP). TRSA, RSP etc.) — Downment statement (PRSP). TRSA, RSP etc.) — Downment statement (PRSP). TRSA, RSP etc.) — Downment statement (PRSP). Insurance card cannot be accepted for identification purposes if prohibited by provincial law (e.g.: in Ontario, Manitoba and Prince Edward Island).  **A document issued by iA Financial Group cannot be accepted.**  **Insurance Island (RSP) and Prince Edward Island).  **A document issued by iA Financial Group cannot be accepted.**  **Insurance Island (RSP) and Island (RSP) a		Principal occupation:	Employer:					
Type of document   Type of doc	10b- Confirmation of Identity of Ind	lividual Co-Applicant						
Caution: Aust include a photo as well as a name and date of birth, Use an authentic, valid and government-issued photo identification that is consistent and shares all characteristics with an original, credible and reliable document issued by the appropriate authority?)  Example: Federal, provincial or territorial government.  Second identification document for the Co-Applicant for remote identification Caution: Identification document must have the name and address.  Example: Notice of assessment - Insurance document residence, which lie file, etc.) – Utility statement (electricity, water, telecommunicators, etc.) – Property tax statement - Prosonalized chapte, with name and address.  Example: Notice of assessment insurance document residence, which lie file, etc.) – Utility statement (electricity, water, telecommunicators, etc.) – Property tax statement - Prosonalized chapte, with name and address. – Statement from a financial institution liban, account belance, etc.) – Investment statement (benefits, income taxas, person, etc.)  Toc- Tax Status of Individual Co-Applicant Test equisitions are required in compliance with the Common Reporting Standard (SR) and the U.S. Topogree identification of the United States?   No   YES   If YES*, indicate the U.S. Topogree identification of Number (TIN) or Social Security Number (SSN): — Is the Co-Applicant a tax resident in a jurisdiction of the United States?   No   YES   If YES*, indicate the U.S. Topogree identification Number (TIN) or Social Security Number (SSN): — Is the Co-Applicant at the Common Reporting Standard (SR) and the U.S. Topogree identification of the United States?   No   YES   If YES*, indicate the U.S. Topogree identification of the United States?   No   YES   If YES*, indicate the U.S. Topogree identification of the United States?   No   YES   If YES*, indicate the U.S. Topogree identification Number (SIN). If no TIN is available, please give the reason. Use an additional sheet of paper if necessary.  Jurisdiction of tax residence:   Female   Male	(in person or remotely)	•						
government-issued photo identification and issued photo identification that is consistent and shares all characteristics with an original, credible and reliable document issued by the appropriate authority.]  Example: Federal, provincial occument for the operation and identification document must have the name and address.  Example: Notice of assessment – Insurance document (residence, vehicle, life, etc.) – Unity statement (electricity, water, telecommunications, etc.) – Property tax statement. Personalized cheque with name and address.  Example: Notice of assessment – Insurance document (residence, vehicle, life, etc.) – Unity statement (electricity, water, telecommunications, etc.) – Property tax statement. Personalized cheque with name and address. Statement Personalized cheque with name and address. Statement Personalized cheque with name and address. Statement from a financial institution (loan, account balance, etc.) – Investment statement (IRRS; TSA, RES; Ret.) – Government statement (IRRS; TSA, RES) Ret.) – State Co-Applicant a tax resident or a citizen of the United States?   NO   YES   If "YES", indicate the U.S. Taxpayer identification Number (TIN) or Social Security Number (ISN):   - Is the Co-Applicant a tax resident or a citizen of the United States?   NO   YES   If "YES", specify the jurisdiction (s) of tax residence and Taxpayer Identification Number (TIN) in Ton Tin Is available, please give the reason. Use an additional sheet of paper if necessary.  Jurisdiction of tax residence and Taxpayer Identification Number (Tin) of Gender:   Female   Male   Tel. (home)   Tel.	-	Type of document:						
Example: Federal, provincial or territorial government.  Second identification document for the Co-Applicant for remote identification Caution: Identification document must have the name and address.  Example: Notice of assessment – Insurance document (residence, vehicle, life, etc.) – Utility statement (RRSP, 185A, RESP, etc.) – Evoremment statement (RRSP, 185A, RESP, etc.) – Evorement statement (RRSP, 185A, RESP, etc.) – Evoremment statement (RRSP, 185A, RESP, etc.) – Evoremment statement (RRSP, 185A, RESP, etc.) – Evoremment statement (RRSP, 185A, RESP, etc.) – Evorement statement (RRSP, 185A,	date of birth. (Use an authentic, valid and		Province/State of issue:					
Example: Federal, provincial or territorial government.  Second identification document for the Co-Applicant for remote identification Caution: Identification document must have the name and address.  Example: Notice of assessment – Insurance document (residence, vehicle, life, etc.) – Utility statement (RRSP, 185A, RESP, etc.) – Evoremment statement (RRSP, 185A, RESP, etc.) – Evorement statement (RRSP, 185A, RESP, etc.) – Evoremment statement (RRSP, 185A, RESP, etc.) – Evoremment statement (RRSP, 185A, RESP, etc.) – Evoremment statement (RRSP, 185A, RESP, etc.) – Evorement statement (RRSP, 185A,		Country of issue:	Y M D					
Second identification document for the Co-Applicant for remote identification Caution: Identification document must have the name and addives.  Example: Notice of assessment — Insurance document (residence, vehicle, life, etc.) — Utility statement (RSP, ret.) — Government statement (RSP, ret.) — Sovernment statement (RSP, ret.) — Ret. ret. ret. ret. ret. ret. ret. ret. r	original, credible and reliable document issued by the appropriate authority.)	Expiry date:	Date identity confirmed:					
Co-Applicant for remote identification Caution: Identification document must have the name and address.  Example: Notice of assessment – Insurance document residence, vehicle, life, etc.) – Utility statement (electricity, water, telecommunications, etc.) – Property tax statement from a financial institution (loan, account balance, etc.) – Investment statement (RBSP, TSA, RESP, etc.) – Government statement (RBSP, TSA, RESP, etc.) – Government statement (RBSP, TSA, RESP, etc.) – Government statement (plenefits, income taxes, pension, etc.)  Oct - Tax Status of Individual Co-Applicant These questions are required in compliance with the Common Reporting Standard (CRS) and the U.S. Foreign Account Tax Compliance Act (FATCA).  In the Co-Applicant and Co-Applicant and Co-Applicant to the death of the Asplicant, or if the contract is held by an Applicant upon the death of the Asplicant of the last surviving applicant.  For the province of Quebec only; The Subrogated Applicant will become an Applicant upon the death of the Asplicant upon the death								
Name of issuing organization:   Date identity, water, telecommunications, etc.) - Property tax statement - Personalized cheque with name and address - Statement from a financial institution (loan, account balance, etc.) - Investment statement (IRSPS, TFSA, RESP, etc.) - Government statement (BrsPS, RESP	Co-Applicant for remote identification  Caution: Identification document must have the name	provincial law (e.g.: in Ontario, Manitoba	and Prince Edward Island).					
Name of Issuing Organization:   Ty   M   D   Date identity confirmed:   D		Type of document:	Document number:					
tax statement - Personalized cheque with name and address — Statement from a financial institution (loan, account balance, etc.) — Investment statement (RRSP, TFSA, RESP, etc.) — Government statement (benefits, income taxes, pension, etc.)    10c- Tax Status of Individual Co-Applicant								
Mandatory if there is a Co-Applicant These questions are required in compliance with the Common Reporting Standard (CRS) and the U.S. Taxpayer Identification Number (TIN) or Social Security Number (SSN):  — Is the Co-Applicant a tax resident or a citizen of the United States? ☐ NO ☐ YES  If "YES", indicate the U.S. Taxpayer Identification Number (TIN) or Social Security Number (SSN):  — Is the Co-Applicant a tax resident in a jurisdiction other than Canada or the United States? ☐ NO ☐ YES  If "YES", specify the jurisdiction(s) of tax residence and Taxpayer Identification Number(SIN). If no TIN is available, please give the reason. Use an additional sheet of paper if necessary.  Jurisdiction of tax residence: Reason for no TIN (if applicable):  11- Successor Applicant/Subrogated Applicant  Optional  For all provinces and territories except Quebec: The Successor Applicant will become the Applicant upon the death of the Applicant, or if the contract is held by an Applicant and Co-Applicant, upon the death of the Interview of Quebec only: The Subrogated Applicant will become an Applicant upon the death of the Boulicant upon the death of the Interview of Quebec only: The Subrogated Applicant will become an Applicant upon the death of the Applicant will become an Applicant upon the death of the Interview of Quebec only: The Subrogated Applicant will become an Applicant upon the death of the Applicant will become an Applicant upon the death of Quebec only: The Subrogated Applicant will become an Applicant upon the death of Quebec only: The Subrogated Applicant will become an Applicant upon the death of Quebec only: The Subrogated Applicant will become an Applicant upon the death of Quebec only: The Subrogated Applicant will become an Applicant upon the death of Quebec only: The Subrogated Applicant will become an Applicant upon the death of Quebec only: The Subrogated Applicant will become an Applicant upon the death of Quebec Only: The Subrogated Applicant will become an Applicant upon the death of Quebec Only: The	address – Statement from a financial institution (loan, account balance, etc.) – Investment statement (RRSP, TFSA, RESP, etc.) – Government statement (benefits,	1 ' 1 '' 1 '' 1						
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If "YES", specify the jurisdiction(s) of tax residence and Taxpayer Identification Number(s) (TIN). If no TIN is available, please give the reason. Use an additional sheet of paper if necessary.    Jurisdiction of tax residence:	These questions are required in compliance with	If "YES", indicate the U.S. Taxpayer Identification Number (TI	IN) or Social Security Number (SSN):					
Reason for no TIN (if applicable):  11- Successor Applicant/Subrogated Applicant  Optional  For all provinces and territories except Quebec: The Successor Applicant will become the Applicant upon the death of the Applicant, or if the contract is held by an Applicant and Co-Applicant, upon the death of the last surviving applicant.  For the province of Quebec only: The Subrogated Applicant will become an Applicant upon the death		If "YES", specify the jurisdiction(s) of tax residence and Taxpe the reason. Use an additional sheet of paper if necessary.	ayer Identification Number(s) (TIN). If no TIN is available, please give					
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The Successor Applicant will become the Applicant upon the death of the Applicant, upon the death of the last surviving applicant.  For the province of Quebec only: The Subrogated Applicant upon the death	•		Last name:					
For the province of Quebec only: The Subrogated Applicant will become an Applicant upon the death	The Successor Applicant will become the Applicant upon the death of the Applicant, or if the contract is held by an Applicant and Co-Applicant, upon the	Date of birth:	Gender: Female Male					
	For the province of Quebec only: The Subrogated Applicant will become an Applicant upon the death							

10- Co-Applicant

12- Guarantee Maturity Date for the	<b>Ecoflex Series</b>	100/100	0					
Complete only if a Premium is invested in the Ecoflex Series 100/100 and the Annuitant is less than 56 years old.	The Guarantee Maturity Date must be at least fifteen (15) years from the date Ecoflex Series 100/100 Fund Units are credited for the first time to the Contract and must be between the Annuitant's 60th and 71st birthdays.  If the Guarantee Maturity Date is not specified or is not well established, this date is automatically established by the Company at the Annuitant's 71st birthday.  Please refer to the Contract if the Annuitant is age 56 or over; the Guarantee Maturity Date shall be set at exactly fifteen (15) years from the Initial Investment Date of Ecoflex Series 100/100.  Guarantee Maturity Date:							
13- Investment Instructions	Guarantee matant,		· · · · · · · · · · · · · · · · · · ·					
For pre-authorized debit (PAD), please complete section 20 <i>Pre-Authorized Debit (PAD).</i> For an internal transfer from an iA contract, form F51-153A-6 <i>Request for transfer between contracts</i> is required.	Transfer from and	inimum \$100) SP Loan or Inv from iA contr other instituti Company	): \$vestment loan: \$_ ract: Contract nu ion: (attach transfer	mber:	\$	Appro	ount: \$ oximate amount	
The Daily Interest Fund+ (DIF+) is not available in Fundserv contracts.  * Contracts administered by the Fundserv network only	Daily Interest Fur	nd+ (DIF+): (segregated	funds):			(Complete		
For segregated funds, you must attach a copy of an investor profile (see section 21 for Electronic profile details).  Please use table F13-1000A for the investment fund numbers.  Deposits of \$1 million or more in segregated funds for the same annuitant must be approved by the company. Please write to savings@ia.ca for approval.  * Contracts administered by the Fundserv network only	Fund no.	ent funds)	If FEL, % of pre	miums	% or\$		Wire order no.*	
Minimum guaranteed interest funds: \$500	Table B (Guarant	teed Intere	est Fund)					
	Amount (\$)	Rate (%)	Term  1 month or years  years			Type of interest  Compound (Default) Simple  Compound (Default) Simple		
If no box is checked, investments at maturity will be transferred to the Daily Interest Fund+, then invested in accordance with the AIT established for the DIF+, if applicable.	Instructions for inv Same term Instructions for sin Paid annually Paid by: Direct de	Other instruc  nple (for nor  Paid month	ctions, please sper n-registered con hly	ntracts) type of	f <b>interest payment o</b>	ption:		

14- Automatic Investment Term (Al	T)				
AIT on the Daily Interest Fund+  Not applicable for Income Stage Funds of the FORLIFE Series.	Same instructions as in  High Interest Savings A		%		
Not available for Fundserv contracts.  If no AIT instructions are received by the Company, all	Fund no.	%	Fund no.	%	
Premiums will be invested, according to the applicable			1 1 1		
terms of the Contract, in the Daily Interest Fund+ or in the Money Market Fund and they will stay in the DIF+					
or Money Market Fund until the Applicant's instructions have been received by the Company.					
, , ,	Guaranteed Interest Fu	nd:			
	Minimum a	mount	Term	Interest pay	ment option
	\$500 (default)	\$1,000		Compound	Simple
15- Dollar Cost Averaging (DCA)					
RSP, LIRA and non-registered contracts only. Not applicable for Income Stage Funds of the FORLIFE Series.  Please refer to form F51-165 <i>Dollar Cost Averaging</i> for DCA Money Market Fund Numbers.  ¹ The transfer will be made on the date of transfer indicated or on the next business day. If no date of transfer is indicated, said date is deemed to be the date this request is received.  The transfer will be in effect until the first of the following events: the end of the "Duration of the transfer" period indicated or the total depletion of all the Premiums initially invested in the Money Market Fund (DCA) indicated. If no duration of transfer is indicated, said duration is automatically established at 12 months.	the Premiums initially invertible.  Date of monthly transfer: Duration of the transfer (m  Fund no. (Specify series and sales charge)5 4 5  Destination funds: Fund no.	inimum 2 months, maxi  INITIAI  If front-end load, % of premiums	et Fund (DCA) distribut num 12 months) – Nur  MONEY MARKET F	ted over the num	the transfer until the depletion of all aber of months indicated below:
16- Contribution in the Event of the	Insured's Disabilit	y (CID)			
The CID premium must not be included with the amount enclosed with this application.	I waive the CID insuran	-	erage (complete form F	·1A).	
17- Special Instructions					

18- Income Payment						
Complete section 19 to indicate the Automatic Withdrawal Term (AWT).	If the contract is held in a No		ount, specify if the incom	e payments will be issued b	y the Dealer:	
Request to join the Periodic Income Program (PIP)	Registration	Registration Non-registered or RRSP				
Optional: Non-registered or RRSP	Type of income payment <sup>1</sup> FORLIFE Income <sup>1</sup> Fixed amount \$					
<sup>1</sup> When investments are made into the Income Stage	Amount <sup>2</sup>	Gross <sup>2</sup>	Net			
Funds of the FORLIFE Series Stage Funds, the default type of income payment is FORLIFE Income. <sup>2</sup> For FORLIFE income, the default is gross. <sup>3</sup> If the market value of the account at the time the	Frequency <sup>3</sup>					
request is received is less than \$5,000, the only authorized frequency is annual.	Date of first payment (Mandatory)	Y M	D 1st to the 5th	not available for the FORLIFE In	come	
Mandatory: RIF, LIF, RLIF or PRIF						
Important and mandatory:		Registered Retirement (RRIF)	it Income Fund	Life Income Fund (LIF)		
- For British Columbia, Alberta, Saskatchewan or Manitoba, please attach spousal consent form.  1 When investments are made into the Income Stage Funds of the FORLIFE Series Stage Funds, the default type of income payment is FORLIFE Income.  2 If selected, can have an impact on the FORLIFE series income.	Type of income payment <sup>1</sup>	FORLIFE Income <sup>1</sup> Minimum Fixed amount <sup>2</sup> \$		FORLIFE Income <sup>1</sup> Minimum  Maximum  Fixed amount <sup>2</sup> \$  Temporary Income <sup>3</sup> Amount \$  Maximum and lifetir		
<ul> <li>Available in Nova Scotia, Quebec, Newfoundland and Labrador. According to the province, the appropriate form must be attached to this form.</li> <li>For FORLIFE income, the default is gross.</li> </ul>		Gross <sup>4</sup> Net Net Gross <sup>4</sup> Of fees (default for the	ne minimum)	Gross <sup>4</sup> (default for the ma Net (not available for LIFs v Net of fees (default for the	vith temporary income)	
f if the market value of the account at the time the request is received is less than \$5,000, the only	Frequency <sup>5</sup>	Monthly (Day 1 to 28) Da		ast day of each month		
authorized frequency is annual.  6 Change in tax withholding (Optional)  — The minimum tax withholding rate must be observed.	Date of first payment (Mandatory)	Y M	D , 🛕 1	If the date of the first payn the year the contract is op withdrawal amount is tax	ened, the TOTAL	
<ul> <li>Complete only if the client wants more tax withheld than the amount applicable according to the Canada Revenue Agency (CRA) standards and, if applicable, those of Revenu Québec.</li> </ul>	Change in tax withholding <sup>6</sup>	Deduct taxes on amou Deduct taxes on the to Federal \$ Provincial \$	-	the minimum)		
7 If the calculation is based on the spouse's age, his/her signature is required in section 22 of this application.	Minimum calculation <sup>7</sup>	My age My spouse's age. Plea First name:  Date of birth:	se complete the followi			
Method of payment	<b>DIRECT DEPOSIT ONLY FO</b> Provide a blank, personalized the financial institution.		ant's name marked void (	or a duly completed written o	confirmation from	
19- Instructions for Automatic With	drawal Term (AWT)					
Please indicate the percentage according to which the Funds will be redeemed, including the High Interest Sovings Account the DIE, and guaranteed investments	PIP (Segragated funds onl					
Savings Account, the DIF+ and guaranteed investments, if applicable.	Fund no.	% Fu	ınd no. %	Fund no.	%	

20- Pre-Authorized Debit (PAD)						
Regular PAD Do not send first payment by cheque. Withdrawal Agreement: Variable Regular PAD not available for Income Stage Funds of the FORLIFE Series.	PAD amount: \$		M D			
One-time PAD	Date of one time PAD:	Investment instructions for the one t  Same instructions as section 13 Inve Other – Please specify:		%		
Banking information Attach a "VOID" cheque or enclose a duly completed written confirmation from the financial institution.	PAD category: Personal Business (If both boxes are left unchecked, the PAD category will be deemed "Personal".)  Transit: Institution: Bank account no.: Pay signing below, I, the bank account owner(s), confirm I have read, understand and agree to the information and provisions of the PAD Agreement in this Application.  For a joint account, all required signatories must sign this PAD Agreement.  For a Company, the PAD Agreement must be signed by an authorized signatory; attach a copy of the company's resolution stipulating the authorized signatories.  X Bank account owner's signature  Joint account owner's signature (if required)					
	Pate: Y M D					
21- Preferences for receiving docum	ents					
	and I can consult them in My Client S via regular mail. (Read the "Electroni	arding all of my contracts with iA Financi. Space*. Documents that are currently onl c communications consent" section for m ion becomes available, I will receive a not e on our website at ia.ca.	y available in paper format will nore information.)	continue to be sent		
To be completed <b>only if</b> you wish to receive your documents by regular mail.	Tax documents (receipts and slips)	s and communications <b>by regular mail</b> : ions (statements, letters, confirmations, n	otices, follow-ups, etc.)			

22- Statement/Signature					
Annuitant, Applicant and Co-Applicant must read, consent to and sign this section.	I, the Annuitant, the Applicant and/or the Co-Applicant, hereby:  — declare that all statements and answers made by me in this application are fully complete and true;  — acknowledge that the provisions enclosed in this application are an integral part of the Contract;  — confirm that I have requested that this application be drafted in the English language only. Par les présentes, je confirme avoir demandé que la présente proposition soit rédigée en anglais uniquement;  — consent to the collection, use and disclosure of my personal information by the Company in the ways and for the purposes identified in the "File and Personal Information" section of the Contract;  — acknowledge receipt of the IAG Savings and Retirement Plan Contract, the IAG Savings and Retirement Plan Information Folder describing the key features of the Contract and the Fund Facts booklet; and  — confirm that I have read, understand and agree to the Contractual Declarations in this Application (and the PAD Agreement, if applicable).				
Request for registration  Not applicable if the Contract is held in a Nominee or an Intermediary Account.	If I selected Retirement Savings Plan in Section 2 hereby request that this Contract be registered as a Registered Retirement Savings Plan (RRSP) under the Income Tax Act (Canada) and any applicable provincial legislation.  If I selected Retirement Income Fund in Section 2 I hereby request that this Contract be registered as a Registered Retirement Income Fund (RRIF) under the Income Tax Act (Canada) and any applicable provincial legislation.				
Electronic Investor Profile	If Fund Units are to be credited to this Contract and if my Investor Profile form is not attached to the present application, I confirm having completed electronic profile no and profile no with my life insurance agent.				
Limited Trading Authorization  Should only be completed if the same parties have already signed a Limited Trading Authorization for an existing contract.	I hereby declare that I have already signed a Limited Trading Authoriza authorizing the life insurance agent acting in this Application to price Financial Services Inc., on my behalf. I request that the LTA which this Application.	tion ("LTA") for existing contract no in ovide written instructions to Industrial Alliance Insurance and applies to existing contract also apply to the Contract issued with			
Signatures	X	•			

## 23- Agent's Disclosure

#### By signing below, I, the life insurance agent, confirm the following:

- that I have verified an unexpired government-issued photo identification document or I confirm that I saw, via videoconference, a current valid photo identification document and a second current valid source of information to verify the identity of the Applicant or the Co-Applicant (if any);
- that I have validated the Annuitant's date of birth;
- that I have verified the identity of the bank account owner/joint owner (if any);
- that I have witnessed all signatures;
- that I have provided to the Applicant and the Co-Applicant (if any), a disclosure statement which discloses, among others:
- the company or companies I represent and my relationship with them;
- that I receive compensation for the sale of life insurance and savings products such as commissions, bonuses, invitations to conferences or other incentives; and
- · my confirmation that I do not have a conflict of interest.
- that I have all the necessary licences, certificates and knowledge (see ia.ca/products-advisors) to submit this application and provide customer service.

If the contract is held in a non-registered account, I hereby confirm:

- if there is a lump-sum payment of \$100,000 or more or, if, based on projections, a cumulative amount of \$100,000 or more could be paid to the applicant/owner of the contract, I have taken reasonable measures to determine if the applicant/owner or the payer, or a family member or a close associate of either, is a politically exposed foreign person, a politically exposed domestic person or the head of an international organization, and I have taken reasonable measures to establish the source of funds;
- that I have taken reasonable measures to determine if a third party is involved and if I have reasonable grounds to suspect that an undisclosed third party is involved in this transaction, I will email details to savings@ia.ca;
- that if required by section 8, I have duly completed and signed a form F51-208A or the F51-2081-1 and I have attached it to this application.

If the Contract is held in a Nominee or Intermediary Account, I hereby:

- confirm to be the duly authorized agent of the Nominee or Intermediary;
- confirm that, if the Contract is issued to be held in a Registered Nominee or Intermediary Account, the Nominee or Intermediary is
  the duly authorized agent of the trustee of the Registered Nominee or Intermediary Account and that this Contract is an authorized
  investment for the Registered Nominee or Intermediary Account; and
- declare any conflicts of interest that I may have with respect to this transaction.

		Υ		M	D	
X	Date:	1 1	1	l ,	L	
Mandatory Life Incurance Agent/Mitness signature	_					١

#### **CONTRACTUAL DECLARATIONS**

I, the Annuitant, the Applicant and the Co-Applicant, hereby:

- declare that the written and/or electronic information provided with respect to the application for this product is complete and accurate and is the basis for the issuance of this Contract;
- understand that I should contact my life insurance agent if I have not received notice of confirmation within 15 days of paying a Premium;
- if the Contract is held in a Nominee or Intermediary Account, authorize Industrial Alliance Insurance and Financial Services Inc. ("iA Financial Group") to deliver the Contract and any other documents or correspondence to the Nominee/Intermediary and to accept instructions from the Nominee/Intermediary in order to execute financial and non-financial transactions including, but not limited to, subscription to an annuity contract and purchases, surrenders and transfers of investment vehicles in accordance with my instructions and the Contract provisions;
- if the Contract is held in a Nominee or Intermediary Account, authorize iA Financial Group to accept new Premiums for this Contract and to pay partial and total surrender amounts requested by the Nominee/Intermediary directly to the Nominee/Intermediary;
- understand that this application and the conditions herein form an integral part of the Contract between iA Financial Group and the Applicant, and if applicable, the Co-Applicant;
- understand that iA Financial Group shall not be liable for instructions provided by the Nominee/Intermediary;
- declare that I have been advised by my life insurance agent to invest in the Funds selected and that I have received all of the information required from my agent regarding these Funds;
- understand that iA Financial Group, its affiliates and their agents can access information about me in order to know me better, better meet my needs and offer the best possible service and client experience. (If you do not wish to allow this access, please contact 1-888-788-6890).

#### Transfer of ownership

I, the Applicant and the Co-Applicant, hereby:

- understand that joint ownership under this Contract in a province or territory other than Quebec is with rights of survivorship. Upon the death of the Applicant or Co-applicant and if the Annuitant is still alive, the deceased co-owner's rights and obligations under the Contract will automatically and fully pass to the surviving Co-owner. I understand that a Subrogated Applicant designation can only take effect upon the death of the last living co-owner.
- understand that joint ownership under this Contract in the Province of Quebec is without rights of survivorship. Upon the death of the Applicant or Co-applicant and if the Annuitant is still alive, the deceased co-owner's rights and obligations under the Contract will be transferred to the estate of the deceased co-owner. However, I acknowledge and agree that we, the Applicant and the Co-Applicant, respectively designate each other as Subrogated Applicant of the Contract. By designating a Subrogated Applicant, I understand, and it is my express intention, that all the deceased's rights and obligations under the Contract shall automatically and fully pass to that Subrogated Applicant.

#### PRE-AUTHORIZED DEBIT (PAD) AGREEMENT

In this pre-authorized debit agreement (the "PAD Agreement"), "I" refers to each bank account holder identified in the "Pre-Authorized Debit (PAD) Agreement" section of the application and who declares the following with respect to himself or herself:

- I authorize iA Financial Group and the financial institution designated (or any other financial institution I may authorize at any time) to begin deductions as per my instructions for regular recurring payments and/or one-time payments from time to time, if applicable, for payment of all premiums, deposits, instalments and charges arising from the Contract.
- Regular payments will be debited by the date and/or at the frequency I have chosen in the application, whereas one-time payments from time to time can be debited from my account on any date. Regular and/or one-time payments will be debited in accordance with the banking information provided in the application;
- I agree that, for the purpose of the PAD Agreement, all PADs from my account will be treated either as Personal or Business\* depending on the choice I have made in section 20 of the application;
- I waive the right to receive pre-notification of an increase or decrease in the amount to be debited or a change in the date and/or frequency of these payments;
- I agree that iA Financial Group is not required to provide me with written notice of a change in a PAD amount that is made as a result of my request.
- If a PAD is dishonoured for any reason such as, but not limited to, insufficient funds ("NSF"), stop payment or account closed, iA Financial Group is authorized to re-submit the payment. Any charges incurred by iA Financial Group as a result of a dishonoured PAD will be charged within the Contract in accordance with the most recent PAD instructions:
- I can cancel or modify the PAD Agreement at any time, subject to providing iA Financial Group thirty (30) days notice in writing. To obtain a cancellation form or for more information on my right to cancel the PAD Agreement, I may contact my financial institution or visit www.payments.ca regarding Rule H1 Pre-authorized debits (PADs).
- Any cancellation of the agreement will not affect my insurance contract(s) and/or contract(s) for financial services, so long as payment is provided by an alternate method;
- iA Financial Group cannot assign the PAD Agreement without providing, any time prior to the next PAD, written notice to me of the assignment.
- I have certain recourse rights if any PAD does not comply with the PAD Agreement. For example, I have the right to receive reimbursement for any PAD that is not authorized or is not consistent with the PAD Agreement. To obtain more information on my recourse rights, I should contact my financial institution or visit www.payments.ca regarding Rule H1 Pre-authorized debits (PADs);
- Before iA Financial Group debits the first PAD payment, it must receive all required documents, duly completed, and be allowed a reasonable period of time to complete its
  administrative processes.
- \* Business PAD means a PAD for the payment of goods or services related to a business or commercial activity of the payor.



# F17A Application

## **About iA Financial Group**

Founded in 1892, iA Financial Group offers life and health insurance products, mutual and segregated funds, savings and retirement plans, RRSPs, securities, auto and home insurance, mortgages and car loans and other financial products and services for both individuals and groups. It is one of the four largest life and health insurance companies in Canada and one of the largest publicly traded companies in the country. iA Financial Group stock is listed on the Toronto Stock Exchange under the ticker symbol IAG.

## **Customer Service Contact Information - Individual Savings and Retirement:**

## Telephone number: 1-844-4iA-INFO (1-844-442-4636) Information: savings@ia.ca

# **Quebec City:**

1080 Grande Allée West PO Box 1907, Station Terminus Quebec City, QC G1K 7M3

Fax: 1-855-685-5161

Transactions: IAQtransactions@ia.ca

#### **Toronto:**

522 University Avenue Suite 400 Toronto, ON M5G 1Y7

Fax: 1-800-810-0197

Transactions: IATtransactions@ia.ca

#### Vancouver:

400–988 Broadway W PO Box 5900 Vancouver, BC V6B 5H6

valicoavel, bo vob silo

Fax: 1-833-832-7474

Transactions: IAV-transactions@ia.ca

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