

#### **CONSOLIDATED UP TO 12 APRIL 2013**

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#### NATIONAL INSTRUMENT 33-109 REGISTRATION INFORMATION

#### PART 1 - DEFINITIONS AND INTERPRETATION

#### 1.1 Definitions

In this Instrument

- "cessation date" means the first day on which an individual ceased to have authority to act as a registered individual on behalf of their sponsoring firm or ceased to be a permitted individual of their sponsoring firm, because of the end of, or a change in, the individual's employment, partnership, or agency relationship with the firm; (date de cessation)
- "firm" means a person or company that is registered, or is seeking registration, as a dealer, adviser or investment fund manager;
- "Form 33-109F1" means Form 33-109F1 Notice of Termination of Registered Individuals and Permitted Individuals;
- "Form 33-109F2" means Form 33-109F2 Change or Surrender of Individual Categories;
- "Form 33-109F3" means Form 33-109F3 Business Locations other than Head Office:
- "Form 33-109F4" means Form 33-109F4 Registration of Individuals and Review of Permitted Individuals:
- "Form 33-109F5" means Form 33-109F5 Change of Registration Information;
- "Form 33-109F6" means Form 33-109F6 Firm Registration;
- "Form 33-109F7" means Form 33-109F7 Reinstatement of Registered Individuals and Permitted Individuals:

"former sponsoring firm" means the registered firm for which an individual most recently acted as a registered individual or permitted individual;

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"NRD submission number" means the unique number generated by NRD to identify each NRD submission:

"permitted individual" means an individual who is

- (a) a director, chief executive officer, chief financial officer, or chief operating officer of a firm, or who performs the functional equivalent of any of those positions, or
- (b) an individual who has beneficial ownership of, or direct or indirect control or direction over, 10 percent or more of the voting securities of a firm;

"principal jurisdiction" means,

- (a) for a firm, whose head office is in Canada, the jurisdiction of Canada in which the firm's head office is located,
- (b) for an individual whose working office is in Canada, the jurisdiction of Canada in which the individual's working office is located,
- (c) for a firm whose head office is outside Canada, the jurisdiction of the firm's principal regulator, as identified by the firm on its most recently submitted Form 33-109F5 or Form 33-109F6, and
- (d) for an individual whose working office is outside Canada, the principal jurisdiction of the individual's sponsoring firm;

"principal regulator" means, for a person or company, the securities regulatory authority or regulator of the person or company's principal jurisdiction;

"registered firm" means a registered dealer, registered adviser or registered investment fund manager;

"registered individual" means an individual who is registered under securities legislation to do any of the following on behalf of a registered firm:

- (a) act as a dealer, underwriter or adviser;
- (b) act as a chief compliance officer;
- (c) act as an ultimate designated person;

"sponsoring firm" means,

- (a) for a registered individual, the registered firm on whose behalf the individual acts,
- (b) for an individual applying for registration, the firm on whose behalf the individual will act if the individual's application is approved,
- (c) for a permitted individual of a registered firm, the registered firm, and
- (d) for a permitted individual of a firm that is applying for registration, the applicant firm.

#### 1.2 Interpretation

Terms used in this Instrument and that are defined in National Instrument 31-102 *National Registration Database* have the same meanings as in National Instrument 31-102 *National Registration Database*.

#### PART 2 - APPLICATION FOR REGISTRATION AND REVIEW OF PERMITTED INDIVIDUALS

#### 2.1 Firm Registration

A firm that applies for registration as a dealer, adviser or investment fund manager must submit each of the following to the regulator:

- (a) a completed Form 33-109F6;
- (b) for each business location of the applicant in the local jurisdiction other than the applicant's head office, a completed Form 33-109F3 in accordance with National Instrument 31-102 National Registration Database.

#### 2.2 Individual Registration

- (1) Subject to subsection (2) and sections 2.4 and 2.6, an individual who applies for registration under securities legislation must submit a completed Form 33-109F4 to the regulator in accordance with National Instrument 31-102 National Registration Database.
- (2) A permitted individual of a registered firm who applies to become a registered individual with the firm must submit a completed Form 33-109F2 to the regulator in accordance with National Instrument 31-102 National Registration Database.

#### 2.3 Reinstatement

- (1) An individual who applies for reinstatement of registration under securities legislation must submit a completed Form 33-109F4 to the regulator in accordance with National Instrument 31-102 National Registration Database, unless the individual submits a completed Form 33-109F7 in accordance with subsection (2).
- (2) The registration of an individual suspended under section 6.1 [If an individual ceases to have authority to act for firm] of National Instrument 31-103 Registration Requirements, Exemptions and Ongoing Registrant Obligations is reinstated on the date the individual submits a completed Form 33-109F7 to the regulator in accordance with National Instrument 31-102 National Registration Database if all of the following apply:
  - (a) the Form 33-109F7 is submitted on or before the 90<sup>th</sup> day after the cessation date;
  - (b) the individual's employment, partnership or agency relationship with the former sponsoring firm did not end because the individual was asked by the firm to resign, resigned voluntarily or was dismissed, following an allegation against the individual of any of the following:
    - (i) criminal activity;
    - (ii) a breach of securities legislation;
    - (iii) a breach of a rule of an SRO;
  - (c) after the cessation date there have been no changes to the information previously submitted in respect of any of the following items of the individual's Form 33-109F4:
    - (i) item 13 [Regulatory disclosure];
    - (ii) item 14 [Criminal disclosure];
    - (iii) item 15 [Civil disclosure];
    - (iv) item 16 [Financial disclosure];
  - (d) the individual is seeking reinstatement with a sponsoring firm in the same category of registration in which the individual was registered on the cessation date;

(e) the new sponsoring firm is registered in the same category of registration in which the individual's former sponsoring firm was registered.

#### 2.4 Application to Change or Surrender Individual Registration Categories

A registered individual who applies for registration in an additional category, or to surrender a registration category, must make the application by submitting a completed Form 33-109F2 to the regulator in accordance with National Instrument 31-102 National Registration Database.

#### 2.5 Permitted Individuals

- (1) A permitted individual must submit a completed Form 33-109F4 to the regulator in accordance with National Instrument 31-102 National Registration Database, no more than 10 days after becoming a permitted individual, unless the individual submits a Form 33-109F7 in accordance with subsection (2).
- (2) An individual who has ceased to be a permitted individual of a former sponsoring firm and becomes a permitted individual of a new sponsoring firm may submit a completed Form 33-109F7 to the regulator if all of the following apply:
  - (a) the Form 33-109F7 is submitted in accordance with National Instrument 31-102 National Registration Database
    - (i) no more than 10 days after becoming a permitted individual of the new sponsoring firm, and
    - (ii) no more than 90 days after the cessation date;
  - (b) the individual holds the same permitted individual status with the new sponsoring firm that they held with the former sponsoring firm;
  - (c) the conditions described in paragraphs (b) and (c) of subsection 2.3(2) are met.

#### 2.6 Commodity Futures Act Registrants

- (1) In Manitoba and Ontario, despite subsection 2.1(b), if a firm applies for registration under section 2.1 and is registered under the *Commodity Futures Act*, the applicant is not required to submit a completed Form 33-109F3 under section 3.2 for any business location of the applicant that is recorded on NRD.
- (2) In Manitoba and Ontario, despite subsection 2.2(1), if an individual applies for registration under securities legislation and is recorded on NRD

with his or her sponsoring firm as registered under the *Commodity Futures Act*, the individual must make the application by submitting a completed Form 33-109F2 to the regulator in accordance with National Instrument 31-102-*National Registration Database*.

#### PART 3 - CHANGES TO REGISTERED FIRM INFORMATION

#### 3.1 Notice of Change to a Firm's Information

- (1) Subject to subsections (3) or (4), a registered firm must notify the regulator of a change to any information previously submitted in Form 33-109F6 or under this subsection, as follows:
  - (a) for a change previously submitted in relation to part 3 of Form 33-109F6, within 30 days of the change;
  - (b) for a change previously submitted in relation to any other part of Form 33-109F6, within 10 days of the change.
- (2) A notice of change referred to in subsection (1) must be made by submitting a completed Form 33-109F5.
- (3) A notice of change is not required under subsection (1) if the change relates to any of the following:
  - (a) a business location other than the head office of the firm if the firm submits a completed Form 33-109F3 under section 3.2;
  - (b) a termination, or a change, of a registered firm's employment, partnership or agency relationship with an officer, partner or director of the registered firm if the firm submits a completed Form 33-109F1 under subsection 4.2(1);
  - (c) the addition of an officer, partner, or director to the registered firm if that individual submits either of the following:
    - (i) a completed Form 33-109F4 under subsection 2.2(1) or 2.5(1);
    - (ii) a completed Form 33-109F7 under subsection 2.3(2) or 2.5(2);
  - (d) the information in the supporting documents referred to in any of the following items of Form 33-109F6:
    - (i) item 3.3 [Business documents];

- (ii) item 5.1 [Calculation of excess working capital];
- (iii) item 5.7 [Directors' resolution for insurance];
- (iv) item 5.13 [Audited financial statements];
- (v) item 5.14 [Letter of direction to auditors].
- (4) A person or company that submitted a completed Schedule B [Submission to Jurisdiction and Appointment of Agent for Service] to Form 33-109F6 must notify the regulator of a change to the information previously submitted in item 3 [Name of agent for service of process] or item 4 [Address for service of process on the agent for service] of that schedule, by submitting a completed Schedule B no more than 10 days after the change;
- (5) Subsection (4) does not apply to a person or company after they have ceased to be registered for a period of 6 years or more.
- (6) For the purpose of subsections (2) and (4), the person or company may give the notice by submitting it to the principal regulator.

#### 3.2 Changes to Business Locations

A registered firm must notify the regulator of the opening of a business location, other than a new head office, or of a change to any information previously submitted in Form 33-109F3, by submitting a completed Form 33-109F3 to the regulator in accordance with National Instrument 31-102 National Registration Database, within 10 days of the opening of the business location or change.

## PART 4 - CHANGES TO REGISTERED INDIVIDUAL AND PERMITTED INDIVIDUAL INFORMATION

#### 4.1 Notice of Change to an Individual's Information

- (1) Subject to subsection (2), a registered individual or permitted individual must notify the regulator of a change to any information previously submitted in respect of the individual's Form 33-109F4 as follows:
  - (a) for a change of information previously submitted in items 4 [Citizenship] and 11 [Previous employment] of Form 33-109F4, within 30 days of the change;
  - (b) for a change of information previously submitted in any other items of Form 33-109F4, within 10 days of the change.

- (2) A notice of change is not required under subsection (1) if the change relates to information previously submitted in item 3 [Personal information] of Form 33-109F4.
- (3) A notice of change under subsection (1) must be made by submitting a completed Form 33-109F5 to the regulator in accordance with National Instrument 31-102 National Registration Database.
- (4) Despite subsection (3), a notice of change referred to in subsection (1) must be made by submitting a completed Form 33-109F2 to the regulator in accordance with National Instrument 31-102 National Registration Database, if the change relates to:
  - (a) an individual's status as a permitted individual of the sponsoring firm;
  - (b) the removal or the addition of a category of registration;
  - (c) the surrender of registration in one or more non-principal jurisdictions.

#### 4.2 Termination of Employment, Partnership or Agency Relationship

- (1) A registered firm must notify the regulator of the end of, or a change in, a sponsored individual's employment, partnership, or agency relationship with the firm if the individual ceases to have authority to act on behalf of the firm as a registered individual or permitted individual by submitting a Form 33-109F1 to the regulator in accordance with National Instrument 31-102 National Registration Database with
  - (a) items 1 through 4 completed, and
  - (b) item 5 completed unless the reason for termination under item 4 was death of the individual.
- (2) A registered firm must submit to the regulator the information required under
  - (a) subsection (1)(a), within 10 days of the cessation date, and
  - (b) subsection (1)(b), within 30 days of the cessation date.
- (3) A registered firm must, within 10 days of a request from an individual for whom the registered firm was the former sponsoring firm, provide to the individual a copy of the Form 33-109F1 that the registered firm submitted under subsection (1) in respect of that individual.

- (4) If a registered firm completed and submitted the information in item 5 of a Form 33-109F1 in respect of an individual who made a request under subsection (3) and that information was not included in the initial copy provided to the individual, the registered firm must provide to that individual a further copy of the completed Form 33-109F1, including the information in item 5, within the later of
  - (a) 10 days after the request by the individual under subsection (3), and
  - (b) 10 days after the submission pursuant to subsection (2)(b).

#### PART 5 - DUE DILIGENCE AND RECORD-KEEPING

#### 5.1 Sponsoring Firm Obligations

- (1) A sponsoring firm must make reasonable efforts to ensure the truth and completeness of information that is submitted in accordance with this Instrument for any individual.
- (2) A sponsoring firm must obtain from each individual who is registered to act on behalf of the firm, or who is a permitted individual of the firm, a copy of the Form 33-109F1 most recently submitted by the individual's former sponsoring firm in respect of that individual, if any, within 60 days of the firm becoming the individual's sponsoring firm.
- (3) A sponsoring firm must retain all documents used by the firm to satisfy its obligation under subsection (1) as follows:
  - (a) in the case of a registered individual, for no less than 7 years after the individual ceases to be registered to act on behalf of the firm;
  - (b) in the case of an individual who applied for registration but whose registration was refused by the regulator, for no less than 7 years after the individual applied for registration; or
  - (c) in the case of a permitted individual, for no less than 7 years after the individual ceases to be a permitted individual with the firm.
- (4) Without limiting subsection (3), if a registered individual, an individual applying for registration, or a permitted individual appoints an agent for service, the sponsoring firm must keep the original Appointment of Agent for Service executed by the individual for the period of time set out in paragraph (3)(b).

(5) A sponsoring firm that retains a document under subsection (3) or (4) in respect of an NRD submission must record the NRD submission number on the first page of the document.

#### PART 6 - TRANSITION

#### 6.1 All Registered Firms to File Form 33-109F6 – September 30, 2010

A registered firm that was registered before September 28, 2009 must submit a completed Form 33-109F6 to the regulator on or before September 30, 2010.

#### 6.2 Notice of Change for Firms Registered before September 28, 2009

- (1) In this section, "Form 3" means the form that a firm submitted before this Instrument came into force to apply for registration as a dealer, adviser or underwriter in the jurisdiction that, at the time the application was made, would have been the firm's principal jurisdiction under this Instrument.
- (2) Subject to subsection (5), a registered firm that was first registered in a jurisdiction of Canada before this Instrument came into force and that has not submitted a completed Form 33-109F6 to the regulator, must notify the regulator of a change to any information previously submitted
  - (a) in a notice of agent and address for service, by submitting to the regulator a completed Schedule B to Form 33-109F6, no more than 10 days after the change;
  - (b) in Form 3 or in any notice of change to information in that form submitted to the regulator, as follows:
    - (i) for a change of information equivalent to the information referred to in part 3 of Form 33-109F6, within 30 days of the change;
    - (ii) for a change of information equivalent to the information referred to in any other part of Form 33-109F6, within 10 days of the change.
- (3) A registered firm referred to in subsection (2) must notify the regulator of a change in its auditor or financial year-end within 10 days of the change.
- (4) For the purpose of subsections (2) and (3) the firm may give the notice by submitting it to the principal regulator.
- (5) A notice of change is not required under subsection (2) if the change relates to any of the following:

- (a) the addition of an officer, partner, or director to the registered firm if that individual
  - (i) submits a completed Form 33-109F4 under subsection 2.2(1) or 2.5(1), or
  - (ii) submits a completed Form 33-109F7 under subsection 2.3(2) or 2.5(2);
- (b) a termination, or a change, of a registered firm's employment, partnership or agency relationship with an officer, partner or director of the registered firm if the firm submits a completed Form 33-109F1 under subsection 4.2(1);
- (c) a business location other than the head office of the firm if the firm submits a completed Form 33-109F3 under section 3.2;
- (d) information equivalent to the information referred to in section 3.1(3)(d).

#### 6.3 National Registration Database Transition Period

- (1) In this section, "NRD access date" means the first day following September 25, 2009 that an NRD filer has access to NRD to make NRD submissions.
- (2) A notice submitted by an NRD filer before September 25, 2009, and not accepted or denied by the regulator by that date, must be resubmitted, as if the time required for the submission had fallen within the period commencing on September 25, 2009 and ending on the day before the NRD access date, in accordance with subsections (3), (4) and (6) as applicable.
- (3) Except in the case of a notice referred to in subsection (4), if the time required for making either of the following submissions falls within the period commencing on September 25, 2009 and ending on the day before the NRD access date, the time for making the submission is extended to the 45th day following the NRD access date:
  - (a) a notice that is required to be submitted in NRD format;
  - (b) a Form 33-109F4 that is required to be submitted under subsection 2.5(1).
- (4) If the time required for making either of the following submissions falls within the period commencing on September 25, 2009 and ending on the

day before the NRD access date, the submission must be made other than through the NRD website:

- (a) a notice referred to in subsection 4.1(1) if the change relates to previously submitted information about any of the following items of the individual's Form 33-109F4:
  - (i) item 14 [Criminal disclosure];
  - (ii) item 15 [Civil disclosure];
  - (iii) item 16 [Financial disclosure];
- (b) a notice of termination referred to in subsection 4.2(1) from a former sponsoring firm, within the time required under subsection 4.2(2), if the individual's employment, partnership or agency relationship with the firm ended because the individual resigned or was dismissed for cause.
- (5) From September 28, 2009 to the day before the NRD access date, an individual may submit any of the following to the regulator other than through the NRD website:
  - (a) Form 33-109F7;
  - (b) Form 33-109F2;
  - (c) Form 33-109F4 other than under subsection 2.5(1).
- (6) If an NRD filer makes a submission other than through the NRD website under subsection (4) or (5), the NRD filer must resubmit the information in NRD format to the regulator as follows:
  - (a) for a Form 33-109F7 submitted under paragraph (5)(a),
    - (i) if the cessation date was on or after September 28, 2009, by submitting a completed Form 33-109F7 no later than 30 days after the NRD access date:
    - (ii) if the cessation date was before September 28, 2009, by submitting a completed Form 33-109F4 no later than 30 days after the NRD access date;
  - (b) for any other submission no later than 30 days after the NRD access date.

#### 6.4 Transition – Reinstatement under Subsections 2.3(2) and 2.5(2)

- (1) Despite subsection 2.3(2), from the NRD access date to December 28, 2009 an individual who seeks reinstatement of registration under subsection 2.3(2) must submit a completed Form 33-109F4 to the regulator in accordance with National Instrument 31-102 National Registration Database, if the cessation date occurred before September 28, 2009.
- (2) For greater certainty, the registration of an individual who makes a submission under subsection (1) is reinstated in accordance with subsection 2.3(2) only if all of the conditions in paragraphs (a) through (e) of subsection 2.3(2) are met.
- (3) Subsection 2.5(2) does not apply to a permitted individual whose cessation date occurred before September 28, 2009.

#### PART 7 - EXEMPTION

#### 7.1 Exemption

- (1) The regulator or the securities regulatory authority may grant an exemption from this Instrument, in whole or in part, subject to such conditions or restrictions as may be imposed in the exemption.
- (2) Despite subsection (1), in Ontario, only the regulator may grant such an exemption.
- (3) Except in Ontario, an exemption referred to in subsection (1) is granted under the statute referred to in Appendix B of National Instrument 14-101 *Definitions*, opposite the name of the local jurisdiction.

#### PART 8 - REPEAL AND EFFECTIVE DATE

#### 8.1 Repeal

National Instrument 33-109 *Registration Information*, which came into force on 11 May 2005, is repealed.

#### 8.2 Effective Date

This Instrument comes into force on the day National Instrument 31-103 Registration Requirements and Exemptions comes into force.

# FORM 33-109F1 NOTICE OF TERMINATION OF REGISTERED INDIVIDUALS AND PERMITTED INDIVIDUALS (section 4.2)

#### **GENERAL INSTRUCTIONS**

Complete and submit this form to notify the relevant regulator(s) or, in Québec, the securities regulatory authority, or self-regulatory organization (SRO) that a registered individual or permitted individual has left their sponsoring firm or has ceased to act in a registerable capacity or as a permitted individual.

#### Terms

In this form, "cessation date" (or "effective date of termination") means the first day on which an individual ceased to have authority to act as a registered individual on behalf of their sponsoring firm or ceased to be a permitted individual of their sponsoring firm, because of the end of, or a change in, the individual's employment, partnership, or agency relationship with the firm.

#### How to submit the form

Submit this form at the National Registration Database (NRD) website in NRD format at www.nrd.ca.

If you are relying on the temporary hardship exemption in section 5.1 of National Instrument 31-102 [National Registration Database], you may submit this form in a format other than NRD format.

#### When to submit the form

You must submit the responses to Item 1, Item 2, Item 3 and Item 4 within 10 days of the effective date of termination.

If you are required to complete Item 5, you must submit those responses within 30 days of the termination date. If you are submitting the responses to Item 5, in NRD format, after Items 1 to 4 have been submitted at NRD, use the NRD submission type called "Update/Correct Termination Information" to complete Item 5 of this form.

| Item 1 | Terminating firm      |
|--------|-----------------------|
| 1.     | Name                  |
| 2.     | NRD number            |
| Item 2 | Terminated individual |
| 1.     | Name                  |
| 2      | NDD number            |

### Item 3 Business location of the terminated individual 1. Address NRD number \_\_\_\_\_ 2. Item 4 Date and reason for termination 1. Cessation date / Effective date of termination (YYYY/MM/DD) This is the first day that the individual ceased to have authority to act in a registerable capacity on behalf of the firm or ceased to be a permitted individual. 2. Reason for termination / cessation (check one): Resigned - voluntary Resigned - at the firm's request Dismissed in good standing Dismissed for cause Completed temporary employment contract Retired Deceased Other Item 5 Details about the termination Complete Item 5 except where the individual is deceased. In the space below: • state the reason(s) for the cessation / termination and • provide details if the answer to any of the following questions is "Yes". [For NRD Format only:] This information will be disclosed within 30 days of the effective date of

Answer the following questions to the best of the firm's knowledge.

Not applicable: individual is retired or deceased

termination

|      | In the past 12 months:  | Yes | No |
|------|---|-----|----|
| 1.   | Was the individual charged with any criminal offence?   |     |    |
| 2.   | Was the individual the subject of any investigation by any securities or financial industry regulator?  |     |    |
| 3.   | Was the individual subject to any significant internal disciplinary measures at the firm or at any affiliate of the firm related to the individual's activity as a registrant?  |     |    |
| 4.   | Were there any written complaints, civil claims and/or arbitration notices filed against the individual or against the firm about the individual's securities-related activities that occurred while the individual was registered or a permitted individual authorized to act on behalf of the firm?   |     |    |
| 5.   | Does the individual have any undischarged financial obligations to clients of the firm?   |     |    |
| 6.   | Has the firm or any affiliate of the firm suffered significant monetary loss or harm to its reputation as a result of the individual's actions?   |     |    |
| 7.   | Did the firm or any affiliate of the firm investigate the individual relating to possible material violations of fiduciary duties, regulatory requirements or the compliance policies and procedures of the firm or any affiliate of the firm? Examples include making unsuitable trades or investment recommendations, stealing or borrowing client money or securities, hiding losses from clients, forging client signatures, money laundering, deliberately making false representations and engaging in undisclosed outside business activity. |     |    |
| 8.   | Did the individual repeatedly fail to follow compliance policies and procedures of the firm or any affiliate of the firm?   |     |    |
| 9.   | Did the individual engage in discretionary management of client accounts or otherwise engage in registerable activity without appropriate registration or without the firm's authorization?   |     |    |
| Reas | ons/Details <u>:</u>  |     |    |
|      |   |     |    |

Item 6 [repealed]

| Item 7 | Warning |
|--------|---------|
|--------|---------|

It is an offence under securities legislation and/or derivatives legislation, including commodity futures legislation to give false or misleading information on this form.

#### Item 8 Certification

| Certif | ication-NRD format:   |
|--------|---|
|        | I am making this submission as agent for the firm. By checking this box, I certify that the firm provided me with all of the information on this form.  |
| Certif | ication-Format other than NRD format:   |
| autho  | gning below I certify to the regulator or, in Québec, the securities regulatory ority, in each jurisdiction where I am submitting this form for the firm, either directly ough the principal regulator, that: |
|        |   |

- I have read this form and understand the questions, and
  all of the information provided on this form is true and complete.

| Name of firm                                       |
|--|
| Name of authorized signing officer or partner      |
|  |
| Title of authorized signing officer or partner     |
| Signature of authorized signing officer or partner |
| Date signed(YYYY/MM/DD)                            |

## Schedule A [repealed]

## FORM 33-109F2 CHANGE OR SURRENDER OF INDIVIDUAL CATEGORIES (section 2.2(2), 2.4, 2.6(2) or4.1(4))

#### **GENERAL INSTRUCTIONS**

Complete and submit this form to notify the relevant regulator(s) or, in Québec, the securities regulatory authority, or self-regulatory organization (SRO) that a registered individual or permitted individual seeks to add and/or remove individual registration categories or permitted activities.

#### **Terms**

In this form, "you", "your" and "individual" mean the registered individual or permitted individual who is seeking to add and/or remove registration categories or permitted activities.

#### How to submit this form

Alberta

Submit this form at the National Registration Database (NRD) website in NRD format at www.nrd.ca.

If you are relying on the temporary hardship exemption in section 5.1 of National Instrument 31-102, you may submit this form in a format other than NRD format.

#### Item 1 Individual Name of individual \_\_\_\_\_ NRD number of individual Item 2 **Registration jurisdictions** 1. Are you filing this form under the passport system / interface for registration? Choose "no" if you are registered in: only one jurisdiction in Canada (a) more than one jurisdiction in Canada and you are requesting a surrender (b) in a non-principal jurisdiction or jurisdictions, but not in your principal jurisdiction more than one jurisdiction in Canada and you are requesting a change (C)only in your principal jurisdiction Yes No Check each jurisdiction where you are seeking the change or surrender of individual categories of registration.

| ☐ British Columbia  |
|---|
| ☐ Manitoba  |
| ☐ New Brunswick   |
| ☐ Newfoundland and Labrador   |
| ☐ Northwest Territories   |
| □ Nova Scotia   |
| Nunavut   |
| Ontario   |
| Prince Edward Island  |
| ☐ Québec  |
| Saskatchewan  |
| Yukon   |
|   |
| Item 3 Removing categories  What categories are you seeking to remove?  |
|   |
| What categories are you seeking to remove?  |
| What categories are you seeking to remove?  Item 4 Adding categories  |
| What categories are you seeking to remove?  Item 4 Adding categories  Categories  |
| What categories are you seeking to remove?  Item 4 Adding categories  Categories  1. What categories are you seeking to add?  2. Professional liability insurance (Québec mutual fund dealers and Québec scholarship) |

| If "No", state:  |
|--|
| The name of your insurer   |
| Your policy number   |
| 3. Relevant securities industry experience   |
| If you have not been registered in the last 36 months and you passed the required examination more than 36 months ago, do you consider that you have gained 12 months of relevant securities industry experience during the 36 month period? |
| Yes No N/A   |
| If you are an individual applying for IIROC approval, select "Not Applicable" above.   |
| If "yes", complete Schedule A.   |
| Item 5 Reason for surrender  |
| If you are seeking to remove a category or permitted activity, state the reason for the surrender in the local jurisdiction.   |
|  |

#### Item 6 Notice of collection and use of personal information

The personal information required under this form is collected on behalf of, and used by, the securities regulatory authorities in the jurisdictions set out in Schedule A to administer and enforce certain provisions of their securities legislation or derivatives legislation or both.

The personal information required under this form is also collected by and used by the SROs set out in Schedule A to administer and enforce their respective by-laws, regulations, rules, rulings and policies.

By submitting this form, the individual consents to the collection by the securities regulatory authorities or applicable SRO of this personal information, and any police records, records from other government or non-governmental regulators or SROs, credit records and employment records about the individual that the securities regulatory authorities or applicable SRO may need to complete their review of the information submitted in this form relating to the individual's continued fitness for registration or approval, if applicable, in accordance with the legal authority of the securities regulatory authorities while the individual is registered with or approved by it. Securities regulatory authorities or SROs may contact government and private bodies or

agencies, individuals, corporations and other organizations for information about the individual.

If you have any questions about the collection and use of this information, contact the securities regulatory authorities or applicable SRO in any jurisdiction in which the required information is submitted. See Schedule A for details. In Québec, you can also contact the Commission d'accès à l'information at 1-888-528-7741 or visit its website at www.cai.gouv.gc.ca.

#### Item 7 Warning

It is an offence under securities legislation and/or derivatives legislation, including commodity futures legislation to give false or misleading information on this form.

#### Item 8 Certification

#### Certification-NRD format:

I confirm I have discussed the questions in this form with an officer, branch manager or supervisor of my sponsoring firm. To the best of my knowledge and belief, the officer, branch manager or supervisor was satisfied that I fully understood the questions. I will limit my activities to those permitted by my category of registration.

I am making this submission as agent for the individual identified in this form. By checking this box, I certify that the individual provided me with all of the information on this form.

#### Certification-Format other than NRD format:

By signing below:

- 1. I certify to the regulator or, in Québec, the securities regulatory authority, in each jurisdiction where I am submitting this form, either directly or through the principal regulator, that:
  - I have read this form and understand the questions, and
  - all of the information provided on this form is true, and complete.
- 2. I confirm I have discussed the questions in this form with an officer, branch manager or supervisor of my sponsoring firm. To the best of my knowledge and belief, the officer, branch manager or supervisor was satisfied that I fully understood the questions. I will limit my activities to those permitted by my category of registration.

| Signature of i       | ndividual    |  |
|----------------------|--------------|--|
| Date signed <u>.</u> |              |  |
| 9 -                  | (YYYY/MM/DD) |  |

By signing below, I certify to the regulator or, in Québec, the securities regulatory authority, in each jurisdiction where I am submitting this form for the individual, either directly or through the principal regulator, that:

- 1. the individual identified in this form will be engaged by the firm as a registered individual, or a non registered individual, and
- 2. I have, or a branch manager or supervisor or another officer or partner has, discussed the questions set out in this form with the individual. To the best of my knowledge and belief, the individual fully understands the questions.

| Name of firm                                       |
|--|
|  |
| Name of authorized signing officer or partner      |
| Title of authorized signing officer or partner     |
|  |
| Signature of authorized signing officer or partner |
| Date signed(YYYY/MM/DD)                            |

## SCHEDULE A Relevant securities industry experience (Item 4)

| ,  | consibilities in areas relating to the category you are applying itle(s) you have held, as well as start and end dates: |  |
|--|---|--|
|  |   |  |
| ·  | ntage of your time devoted to these activities?   |  |
| %  |   |  |
| Indicate the continuing education activities which you have participated in during the last 36 months and which are relevant to the category of registration you are applying for: |   |  |
| _  |   |  |
| _  |   |  |
| _  |   |  |

#### Schedule B Contact information for Notice of collection and use of personal information

#### **Alberta**

Alberta Securities Commission, Suite 600, 250-5th St. SW Calgary, AB T2P 0R4 Attention: Information Officer Telephone: (403) 355-4151

#### **British Columbia**

British Columbia Securities Commission P.O. Box 10142, Pacific Centre 701 West Georgia Street Vancouver, BC V7Y 1L2 Attention: Freedom of Information Officer

Telephone: (604) 899-6500 or (800) 373-6393 (in

#### Manitoba

The Manitoba Securities Commission 500 - 400 St. Mary Avenue Winnipeg, MB R3C 4K5 Attention: Director of Registrations Telephone (204) 945-2548 Fax (204) 945-0330

#### **New Brunswick**

New Brunswick Securities Commission Suite 300, 85 Charlotte Street Saint John, NB E2L 2J2

Attention: Director, Regulatory Affairs

Telephone: (506) 658-3060

#### **Newfoundland and Labrador**

Securities NL

Financial Services Regulation Division Department of Government Services P.O. Box 8700, 2nd Floor, West Block Confederation Building St. John's, NL A1B 4J6

Attention: Manager of Registrations

Tel: (709) 729-5661

#### **Nova Scotia**

Nova Scotia Securities Commission Suite 400, 5251 Duke Street Halifax, NS B3J 1P3 Attention: Deputy Director, Capital Markets

Telephone: (902) 424-7768

#### **Northwest Territories**

Government of the Northwest Territories P.O. Box 1320

Yellowknife, NWT X1A 2L9

Attention: Deputy Superintendent of Securities

Telephone: (867) 920-8984

#### Nunavut

Legal Registries Division Department of Justice Government of Nunavut P.O. Box 1000 Station 570 Igaluit, NU X0A 0H0

Attention: Deputy Registrar of Securities

Telephone: (867) 975-6590

#### Ontario

Ontario Securities Commission Suite 1903, Box 55 20 Queen Street West Toronto, ON M5H 3S8

Attention: Compliance and Registrant

Regulation

Telephone: (416) 593-8314

e-mail: registration@osc.gov.on.ca

#### **Prince Edward Island**

Securities Registry

Office of the Attorney General B Consumer, Corporate and

Insurance Services Division

P.O. Box 2000

Charlottetown, PE C1A 7N8

Attention: Deputy Registrar of Securities

Telephone: (902) 368-6288

#### Québec

Autorité des marchés financiers 800. square Victoria. 22e étage C.P. 246, tour de la Bourse Montréal (Québec) H4Z 1G3

Attention: Responsable de l'accès à l'information

Telephone: (514) 395-0337 or (877) 525-0337 (in Québec)

#### Saskatchewan

Saskatchewan Financial Services Commission Suite 601, 1919 Saskatchewan Drive

Regina, SK S4P 4H2 Attention: Director

Telephone: (306) 787-5842

Office of the Yukon Superintendent of Securities Government of Yukon Department of Community Services 307 Black Street, 1st Floor PO Box 2703 (C-6) Whitehorse, YT Y1A 2C6

Attention: Superintendent of Securities

Telephone: (867) 667-5466 Fax: (867) 393-6521

http://wwww.community.gov.yk.ca/corp/securities\_about.html

Self-regulatory organization
Investment Industry Regulatory Organization of Canada
121 King Street West, Suite 1600
Toronto, Ontario M5H 3T9
Attention: Privacy Officer
Telephone: (416) 364-6133
E-mail: PrivacyOfficer@iiroc.ca

## FORM 33-109F3 BUSINESS LOCATIONS OTHER THAN HEAD OFFICE (section 3.2])

#### **GENERAL INSTRUCTIONS**

Complete and submit this form to notify the relevant regulator(s) or, in Québec, the securities regulatory authority, or self-regulatory organization (SRO) that a business location has opened or closed, or information about a business location has changed.

| Check  | cone of the following and complete the entire form:   |  |
|--------|---|--|
|        | Opening this business location  |  |
|        | Closing this business location  |  |
|        | Change to the information previously submitted about this business location. Clearly specify the information that has changed.                              |  |
| Submi  | o submit this form<br>t this form at the National Registration Database (NRD) website in NRD format at<br>nrd.ca.   |  |
|        | are relying on the temporary hardship exemption in section 5.1 of National nent 31-102, you may complete and submit this form in a format other than NRD t. |  |
| Item 1 | Type of business location   |  |
| Branc  | h or Business Location  |  |
| Sub-bi | ranch   |  |
| Item 2 | Supervisor or branch manager  |  |
| Name   | of designated supervisor or branch manager  |  |
| NRD n  | umber of the designated supervisor or branch manager  |  |
| Item 3 | Business location information   |  |
| Busine | ess address   |  |
| Mailin | g address (if different from business address)  |  |
| Teleph | none number ()  |  |
| Fax nu | umber ()  |  |

#### Item 4 Notice of collection and use of personal information

The personal information required under this form is collected on behalf of, and used by, the securities regulatory authorities in the jurisdictions set out in Schedule A to administer and enforce certain provisions of their securities legislation or derivatives legislation or both.

The personal information required under this form is also collected by and used by the SROs set out in Schedule A to administer and enforce their respective by-laws, regulations, rules, rulings and policies.

By submitting this form, the individual consents to the collection by the securities regulatory authorities or applicable SRO of this personal information, and any police records, records from other government or non-governmental regulators or SROs, credit records and employment records about the individual that the securities regulatory authorities or applicable SRO may need to complete their review of the information submitted in this form relating to the individual's continued fitness for registration or approval, if applicable, in accordance with the legal authority of the securities regulatory authorities while the individual is registered with or approved by it. Securities regulatory authorities or SROs may contact government and private bodies or agencies, individuals, corporations and other organizations for information about the individual.

If you have any questions about the collection and use of this information, contact the securities regulatory authorities or applicable SRO in any jurisdiction in which the required information is submitted. See Schedule A for details. In Québec, you can also contact the Commission d'accès à l'information at 1-888-528-7741 or visit its website at www.cai.gouv.qc.ca.

#### Item 5 Warning

It is an offence under securities legislation and/or derivatives legislation, including commodity futures legislation to give false or misleading information on this form.

#### Item 6 Certification

#### Certification-NRD format:

□ I am making this submission as agent for the firm. By checking this box, I certify that the firm provided me with all of the information on this form.

#### Certification-Format other than NRD format:

By signing below, I certify to the securities regulator or, in Québec, the securities regulatory authority, in each jurisdiction where I am submitting this form for the firm, either directly or through the principal regulator, that:

| all of the information provided on this form is true, and complete. |
|---|
| Name of firm  |
| Name of authorized signing officer or partner                       |
| Title of authorized signing officer or partner                      |
| Signature of authorized signing officer or partner                  |
| Date signed(YYYY/MM/DD)   |

• I have read this form and understand the questions, and

## Schedule A Contact information for Notice of collection and use of personal information

#### Alberta

Alberta Securities Commission, Suite 600, 250-5<sup>th</sup> St. SW Calgary, AB T2P 0R4

Attention: Information Officer Telephone: (403) 355-4151

#### **British Columbia**

British Columbia Securities Commission P.O. Box 10142, Pacific Centre 701 West Georgia Street Vancouver, BC V7Y 1L2 Attention: Freedom of Information Officer

Telephone: (604) 899-6500 or (800) 373-

6393 (in BC)

#### Manitoba

The Manitoba Securities Commission 500 - 400 St. Mary Avenue Winnipeg, MB R3C 4K5 Attention: Director of Registrations Telephone (204) 945-2548 Fax (204) 945-0330

#### **New Brunswick**

New Brunswick Securities Commission Suite 300, 85 Charlotte Street Saint John, NB E2L 2J2

Attention: Director, Regulatory Affairs

Telephone: (506) 658-3060

#### Newfoundland and Labrador

Securities NL

Financial Services Regulation Division Department of Government Services P.O. Box 8700, 2nd Floor, West Block Confederation Building St. John's, NL A1B 4J6 Attention: Manager of Registrations

Tel: (709) 729-5661

#### Nova Scotia

Nova Scotia Securities Commission

#### Nunavut

Legal Registries Division Department of Justice Government of Nunavut P.O. Box 1000 Station 570 Iqaluit, NU X0A 0H0

Attention: Deputy Registrar of Securities

Telephone: (867) 975-6590

#### Ontario

Ontario Securities Commission Suite 1903, Box 55 20 Queen Street West Toronto, ON M5H 3S8

Attention: Compliance and Registrant

Regulation

Telephone: (416) 593-8314

e-mail: registration@osc.gov.on.ca

#### Prince Edward Island

Securities Registry
Office of the Attorney General B Consumer,
Corporate and
Insurance Services Division
P.O. Box 2000

Charlottetown, PE C1A 7N8

Attention: Deputy Registrar of Securities

Telephone: (902) 368-6288

#### Québec

Autorité des marchés financiers 800, square Victoria, 22e étage C.P. 246, tour de la Bourse Montréal (Québec) H4Z 1G3

Attention: Responsable de l'accès à

l'information

Telephone: (514) 395-0337 or (877) 525-0337 (in

Québec)

#### Saskatchewan

Saskatchewan Financial Services Commission Suite 601, 1919 Saskatchewan Drive Regina, SK S4P 4H2 Suite 400, 5251 Duke Street

Halifax, NS B3J 1P3

Attention: Deputy Director, Capital

Markets

Telephone: (902) 424-7768

#### **Northwest Territories**

Government of the Northwest Territories

P.O. Box 1320

Yellowknife, NWT X1A 2L9

Attention: Deputy Superintendent

Securities

Telephone: (867) 920-8984

Attention: Director

Telephone: (306) 787-5842

#### Yukon

Office of the Yukon Superintendent of Securities

Government of Yukon

Department of Community Services

307 Black Street, 1st Floor

PO Box 2703 (C-6) Whitehorse, YT Y1A 2C6

of Attention: Superintendent of Securities

Telephone: (867) 667-5466

Fax: (867) 393-6521

http://www.community.gov.yk.ca/corp/secur

ities\_about.html

#### **Self-regulatory organization**

Investment Industry Regulatory Organization of

Canada

121 King Street West, Suite 1600

Toronto, Ontario M5H 3T9 Attention: Privacy Officer Telephone: (416) 364-6133 E-mail: PrivacyOfficer@iiroc.ca

# FORM 33-109F4 REGISTRATION OF INDIVIDUALS AND REVIEW OF PERMITTED INDIVIDUALS (section 2.2)

#### **GENERAL INSTRUCTIONS**

Complete and submit this form to the relevant regulator(s) or in Québec, the securities regulatory authority, or self-regulatory organization (SRO) if an individual is seeking registration in individual categories or is seeking to be reviewed as a permitted individual. You only need to complete and submit one of this form regardless of the number of categories you are seeking to be registered in.

#### Terms

In this form, "you", "your" and "individual" mean the individual who is seeking registration or the individual who is filing this form as a permitted individual under securities legislation or derivatives legislation or both.

- "Sponsoring firm" means the registered firm where you will carry out your duties as a registered or permitted individual.
- "Derivatives" means financial instruments, such as futures contracts (including exchange traded contracts), futures options and swaps whose market price, value or payment obligations are derived from, or based on, one or more underlying interests. Derivatives can be in the form of instruments, agreements or securities.
- "Major shareholder" and "shareholder" mean a shareholder who, in total, directly or indirectly owns voting securities carrying 10 per cent or more of the votes carried by all outstanding voting securities.
- "Approved person" means, in respect of a member (Member) of the Investment Industry Regulatory Organization of Canada (IIROC), an individual who is a partner, director, officer, employee or agent of a Member who is approved by the IIROC or another Canadian SRO to perform any function required under any IIROC or another Canadian SRO By-law, Regulation, or Policy.

Several terms used in this form are defined in the securities legislation of your province or territory. Please refer to those definitions.

## How to submit this form NRD format

Submit this form at the National Registration Database (NRD) website in NRD format at www.nrd.ca. You are only required to submit one form regardless of the number of registration categories you are seeking. If you have any questions, contact the compliance, registration or legal department of the sponsoring firm or a legal adviser with securities regulation experience, or visit the NRD information website at <a href="https://www.nrd-info.ca">www.nrd-info.ca</a>.

#### Format, other than NRD format

Name

Item 1

If you are relying on the temporary hardship exemption in section 5.1 of National Instrument 31-102 *National Registration Database*, you may submit this form in a format other than NRD format.

If you need more space, use a separate sheet of paper. Clearly identify the Item and question number. Complete and sign the form, and send it to the relevant regulator(s) or, in Québec, the securities regulatory authority, SRO (s) or similar authority. The number of originally signed copies of the form you are required to submit depends on the province or territory, and on the regulator, the securities regulatory authority or SRO.

To avoid delays in processing this form, be sure to answer all of the questions that apply to you. If you have questions, contact the compliance, registration or legal department of the sponsoring firm or a legal adviser with securities regulation experience, or visit the National Registration Database information website at www.nrd-info.ca.

| 1.     | Legal name     |              |  |                    |
|--------|----------------|--------------|--|--------------------|
| Last r | name           | First name   | Second name (N/A )   | Third name (N/A 🗌) |
| NRD    | number (if ap  | plicable)    |  |                    |
| 2.     | Other person   | nal names    |  |                    |
| _      | •              | _            | ever been, known by any na<br>nicknames or names due to r  | _                  |
| Yes    | ☐ No           |              |  |                    |
| If "ye | s", complete : | Schedule A.  |  |                    |
| 3.     | Use of other   | rnames       |  |                    |
| any r  | •              | an the name( | ver used, operated under, or (s) mentioned above, for exan |                    |
| Yes    | ☐ No           |              |  |                    |
| If "ye | s", complete : | Schedule A.  |  |                    |

#### Item 2 Residential address

Provide all of your residential addresses, including any foreign residential addresses, for the past 10 years.

| 1.    | Current and pr  | evious residentia  | al addre  | esses                          |  |  |
|-------|---|--------------------|-----------|--------------------------------|--|--|
| (nun  |   |                    |           | te, country, postal code)      |  |  |
| Tele  | phone number _  |                    |           |                                |  |  |
| Live  | d at this address s   | ince (YYYY/MM)     |           |                                |  |  |
| lf yo | u have lived at th  | is address for les | ss than 1 | 10 years, complete Schedule B. |  |  |
| 2.    | Mailing addres  | SS                 |           |                                |  |  |
|       | Check here if your mailing address is the same as your current residential address provided above. Otherwise, complete the following: |                    |           |                                |  |  |
| (nun  |   | province, territor | •         | te, country, postal code)      |  |  |
| Item  |   |                    |           | onal information               |  |  |
| 1.    | Date of birth _   | (YYYY/MM/E         | DD)       |                                |  |  |
| 2.    |   | city, province, te |           | or state, country)             |  |  |
| 3.    | Gender  | Female             |           | Male                           |  |  |
| 4.    | Eye colour  |                    |           |                                |  |  |
| 5.    | Hair colour   |                    |           |                                |  |  |
| 6.    | Height  | _ in. or           | [         | □ cm                           |  |  |
| 7     | Weight  | □ lbs_or           |           | □ka                            |  |  |

#### Item 4 Citizenship

| 1.                   | Citizenship information   |
|----------------------|---|
| What                 | is your country of citizenship?   |
|                      | Canada  |
|                      | Other, specify:   |
| <b>2</b> .<br>that c | If you are a citizen of a country other than Canada, complete the following for citizenship.  |
|                      | Check here if you do not have a valid passport. Otherwise, provide:   |
| Passp                | ort number:   |
| Date                 | of issue:<br>(YYYY/MM/DD)   |
| Place                | cof issue:(city, province, territory or state, country)   |
| Item 5               | Registration jurisdictions  |
| 1.                   | Are you filing this form under the passport system / interface for registration?  |
|                      | Only choose "no" if:  |
| jurisdi              | <ul><li>(a) you are seeking registration only in your principal jurisdiction,</li><li>(b) you are seeking review as a permitted individual only in your principal ction</li></ul> |
| of Ca                | and you are not currently registered under securities legislation in any jurisdiction nada,   |
|                      | Yes No No   |
| <b>2</b> .<br>permi  | Check each jurisdiction where you are seeking registration or review as a itted individual:   |
|                      | All jurisdictions Alberta British Columbia Manitoba New Brunswick   |

| Newfoundland and Labrador Northwest Territories Nova Scotia Nunavut Ontario Prince Edward Island Québec Saskatchewan Yukon   |  |  |  |  |  |
|--|--|--|--|--|--|
| Item 6 Individual categories   |  |  |  |  |  |
| 1. On Schedule C, check each category for which you are seeking registration as an individual or review as a permitted individual. If you are seeking review as a permitted individual, check each category that describes your position with your sponsoring firm.                    |  |  |  |  |  |
| 2. If you are seeking registration as a representative of a mutual fund dealer or of a scholarship plan dealer in Québec, are you covered by your sponsoring firm's professional liability insurance?  |  |  |  |  |  |
| Yes No No  |  |  |  |  |  |
| If "No", state:  |  |  |  |  |  |
| The name of your insurer   |  |  |  |  |  |
| Your policy number   |  |  |  |  |  |
| Item 7 Address and agent for service   |  |  |  |  |  |
| 1. Address for service   |  |  |  |  |  |
| You must have one address for service in each province or territory where you are submitting this form. A residential address or a business address is acceptable. A post office box is not acceptable. Complete Schedule D for each additional address for service you are providing. |  |  |  |  |  |
| Address for service:   |  |  |  |  |  |
| (number, street, city, province or territory, postal code)   |  |  |  |  |  |
| Telephone number   |  |  |  |  |  |

| Fax number, if applicable  |  |  |
|--|--|--|
| E-mail address, if available   |  |  |
| 2. Agent for service   |  |  |
| If you have appointed an agent for service, provide the following information for the agent in each province or territory where you have an agent for service. The address of your agent for service must be the same as the address for service above. If your agent for service is not an individual, provide the name of your contact person. |  |  |
| Name of agent for service:   |  |  |
| Contact person: Last name, First name  |  |  |
| Item 8 Proficiency   |  |  |
| 1. Course, examination or designation information and other education  |  |  |
| Complete Schedule E to indicate each course, examination and designation that is required for registration or approval and that you have successfully completed or have been exempted from.  |  |  |
| Check here if you are not required under securities legislation or derivatives legislation or both, or the rules of an SRO to satisfy any course, examination or designation requirements.   |  |  |
| 2. Student numbers   |  |  |
| If you have a student number for a course that you successfully completed with one of the following organizations, provide it below:   |  |  |
| CSI Global Education (formerly Canadian Securities Institute):   |  |  |
| IFSE Institute (formerly IFIC):  |  |  |
| Institute of Canadian Bankers (ICB):   |  |  |
| CFA Institute (formerly AIMR):   |  |  |
| Advocis (formerly CAIFA):  |  |  |
| RESP Dealers Association of Canada:  |  |  |
| Other:   |  |  |

| 3. Exemption refusal  |
|---|
| Has any securities regulator, derivatives regulator or SRO refused to grant you a exemption from a course, examination, designation or experience requirement?  |
| Yes No No   |
| If "Yes", complete Schedule F.  |
| 4. Relevant securities industry experience  |
| If you are an individual applying for IIROC approval, select "Not Applicable below".  |
| If you have not been registered in the last 36 months and you passed the required examination more than 36 months ago, do you consider that you have gained 1 months of relevant securities industry experience during the 36 month period? |
| Yes No No N/A   |
| If "yes", complete Schedule F.  |
| Item 9 Location of employment   |
| 1. Provide the following information for your new sponsoring firm. If you will be working out of more than one location, provide the following information for the location out of which you will be doing most of your business.           |
| NRD location number:  |
| Unique Identification Number (optional) :   |
| Business address: (number, street, city, province, territory or state, country, posta code)   |
| Telephone number: ()Fax number: ()  |
| 2. If the firm has a foreign head office, and/or you are not a resident of Canada provide the address for the location in which you will be conducting business.  |
| Business address: (number, street, city, province, territory or state, country, posta   |
| (number, street, city, province, territory or state, country, posta code)   |

Telephone number: (\_\_\_\_\_) \_\_\_\_\_Fax number: (\_\_\_\_\_) \_\_\_\_\_

[The following under #3 "Type of location", #4 and #5 is for a Format other than NRD format only]

| 3.                         | Type o                           | f locat                    | ion - fo                    | or Format other than NRD format only:   |
|----------------------------|----------------------------------|----------------------------|-----------------------------|---|
|                            | ПНеа                             | ad offic                   | ce                          | ☐ Branch or Business Location ☐ Sub-branch  |
| 4.                         | Nam                              | e of su                    | pervis                      | or or branch manager:   |
| 5.                         |                                  |                            |                             | if the mailing address of the location is the same as the ovided above. Otherwise, complete the following:  |
|                            | Mailin                           | ng add                     |                             |   |
| code)                      | 1                                |                            | (numk                       | per, street, city, province, territory or state, country, postal  |
| Item 1<br>directo          | 0<br>orships                     | Currer                     | nt emp                      | ployment, other business activities, officer positions held and   |
| activit<br>any e<br>busine | ies, incl<br>mployn<br>ess relat | luding<br>nent a<br>ed off | emplond<br>nd bu<br>licer o | nedule G for each of your current business and employment byment and business activities with your sponsoring firm and siness activities outside your sponsoring firm. Also include all r director positions and any other equivalent positions held, pensation or not. |
| Item 1                     | 1                                | Previo                     | us emį                      | ployment and other activities   |
| On Sc<br>years.            | hedule                           | H, cor                     | nplete                      | your employment and other activities history for the past 10-   |
| Item 1                     | 2                                | Resign                     | ations                      | and terminations  |
| -                          | _                                | _                          |                             | been terminated or been dismissed for cause by an employer llegations that you:   |
| 1.                         | Violate                          | ed any                     | statute                     | es, regulations, rules or standards of conduct?   |
|                            | Yes                              |                            | No                          |   |
|                            | If "Yes"                         | , com                      | plete S                     | Schedule I Item 12.1.   |
| <b>2.</b><br>or star       | Failed<br>ndards (               |                            | •                           | tely supervise compliance with any statutes, regulations, rules   |
|                            | Yes                              |                            | No                          |   |
|                            | If "Yes"                         | , com                      | plete S                     | Schedule I Item 12.2.   |

| 3.     | Committed fraud or the wrongful taking of property, including theft?  |  |
|--------|---|--|
|        | Yes No No   |  |
|        | If "Yes", complete Schedule I Item 12.3.  |  |
| Item 1 | Regulatory disclosure   |  |
| 1.     | Securities and derivatives regulation   |  |
| a)     | Other than a registration or permitted individual status that has been recorded under this NRD number, are you now, or have you ever been, registered or licensed with any securities regulator or derivatives regulator or both in any province, territory, state or country to trade in or advise on securities or derivatives or both? |  |
|        | Yes No No   |  |
|        | If "Yes", complete Schedule J, Item 13.1(a).  |  |
| b)     | Have you ever been refused registration or a licence to trade in or advise on securities or derivatives or both in any province, territory state or country?  |  |
|        | Yes No No   |  |
|        | If "Yes", complete Schedule J, Item 13.1(b).  |  |
| c)     | Have you ever been denied the benefit of any exemption from registration provided in any securities or derivatives or both legislation or rules in any province, territory, state or country, other than what was disclosed in Item 8(3) of this form?  |  |
|        | Yes No No   |  |
|        | If "Yes", complete Schedule J, Item 13.1(c).  |  |
| d)     | Are you now, or have you ever been subject to any disciplinary proceedings or any order resulting from disciplinary proceedings under any securities legislation or derivatives legislation or both in any province, territory, state or country?   |  |
|        | Yes No No   |  |
|        | If "Yes" complete Schedule I Item 13.1(d)   |  |

# 2. SRO regulation

| a) | Other than an approval that has been recorded under this NRD number, are you now, or have you ever been, an approved person of an SRO or similar organization in any province, territory, state or country?  |
|----|--|
|    | Yes No No  |
|    | If "Yes", complete Schedule J, Item13.2(a).  |
| b) | Have you ever been refused approved person status by an SRO or similar organization in any province, territory, state or country?  |
|    | Yes No   |
|    | If "Yes", complete Schedule J, Item 13.2(b).   |
| c) | Are you now, or have you ever been, subject to any disciplinary proceedings conducted by any SRO or similar organization in any province, territory, state or country?   |
|    | Yes No   |
|    | If "Yes", complete Schedule J, Item 13.2(c).   |
| 3. | Non-securities regulation  |
| a) | Are you now, or have you ever been, registered or licensed under any legislation which requires registration or licensing to deal with the public in any capacity other than to trade in or advise on securities or derivatives or both in any province, territory, state or country (e.g. insurance, real estate, accountant, lawyer, teacher)? |
|    | Yes No   |
|    | If "Yes", complete Schedule J, Item 13.3(a)  |
| b) | Have you ever been refused registration or a licence under any legislation relating to your professional activities unrelated to securities or derivatives in any province, territory, state or country?   |
|    | Yes No   |
|    | If "Yes", complete Schedule J, Item 13.3(b).   |
| c) | Are you now, or have you ever been, a subject of any disciplinary actions conducted under any legislation relating to your professional activities unrelated to securities or derivatives in any province, territory, state or country?  |

| Yes     |         | No     |                          |
|---------|---------|--------|--------------------------|
| If "Yes | s". cor | nplete | Schedule J. Item 13.3(c) |

### Item 14 Criminal disclosure

### Offences you must disclose

You must disclose all criminal offences committed in any province, territory, state or country. This includes, but is not limited to, criminal offences under federal statutes such as the *Criminal Code* (Canada), *Income Tax Act* (Canada), *the Competition Act* (Canada), *Immigration and Refugee Protection Act* (Canada) and the *Controlled Drugs and Substances Act* (Canada) (or its predecessor, the *Narcotic Control Act* (Canada)). This includes pleas or findings of guilt for impaired driving, which are *Criminal Code* (Canada) matters. If you have been found guilty of a criminal offence, you must disclose the offence even if you have been granted an absolute or conditional discharge.

With respect to questions 14.2 and 14.4, if you or your firm has been found guilty of a criminal offence, or participated in the Alternative Measures Program within the past three years, you must disclose that offence even if an absolute or conditional discharge has been granted, or the charge has been dismissed, withdrawn or stayed. Some exceptions apply to stayed charges, and the Alternative Measures Program which are outlined below.

If you do not disclose a criminal offence under any statute other than the former Young Offenders Act (Canada) or the Youth Criminal Justice Act (Canada), regulators or, in Québec, the securities regulatory authority or self regulatory organization may treat it as a non-disclosure of material information.

## Offences you do not have to disclose

The appropriate response is "No" if any of the following circumstances apply.

You are not required to disclose:

- crimes for which you received an absolute or conditional discharge if the crime has been purged from the criminal records in accordance with the Criminal Records Act (Canada)
- speeding, parking violations or any offence for which a pardon has been granted under the *Criminal Records Act* (Canada) and the pardon has not been revoked
- stayed charges for summary conviction offences that have been stayed for six months or more
- stayed charges for indictable offences that have been stayed for a year or more, and
- offences under the former Young Offenders Act (Canada) or the Youth Criminal Justice Act (Canada)

With respect to questions 14.2 and 14.4, you are not required to disclose an offence for which you or your firm was found guilty if you or the firm participated in the Alternative Measures Program more than three years ago for that offence.

| 1.     | Are there any outstanding or stayed charges against you alleging a criminal offence that was committed in any province, territory, state or country?   |
|--------|--|
|        | Yes No No  |
|        | If "Yes", complete Schedule K, Item 14.1.  |
| 2.     | Have you ever been found guilty, pleaded no contest to, or granted an absolute or conditional discharge from any criminal offence that was committed in any province, territory, state or country?   |
|        | Yes No No  |
|        | If "Yes", complete Schedule K, Item 14.2.  |
| 3.     | To the best of your knowledge, are there any outstanding charges against any firm of which you were, at the time the criminal offence was alleged to have taken place in any province, territory, state or country, a partner, director, officer or major shareholder?                               |
|        | Yes No No  |
|        | If "Yes", complete Schedule K, Item 14.3.  |
| 4.     | To the best of your knowledge, has any firm, when you were a partner, officer, director or major shareholder, ever been found guilty, pleaded no contest to or granted an absolute or conditional discharge from a criminal offence that was committed in any province, territory, state or country? |
|        | Yes No No  |
|        | If "Yes", complete Schedule K, Item 14.4.  |
| Item 1 | 5 Civil disclosure   |
| 1.     | Are there currently any outstanding civil actions alleging fraud, theft, deceit, misrepresentation or similar misconduct against you or a firm where you are or were a partner, director, officer or major shareholder in any province, territory, state or country?                                 |
|        | Yes No   |

|               | If "Yes", complete Schedule L, Item 15.1.  |
|---------------|--|
| 2.            | Have you or a firm where you are or were a partner, director, officer or majo shareholder ever been a defendant or respondent in any civil proceeding ir which fraud, theft, deceit, misrepresentation or similar misconduct is, or was successfully established in a judgment in any province, territory, state or country? |
|               | Yes No D   |
|               | If "Yes", complete Schedule L, Item 15.2.  |
| Item 1        | 6 Financial disclosure   |
| 1.            | Bankruptcy   |
|               | the laws of any applicable jurisdiction, have you or has any firm when you were<br>ner, director, officer or major shareholder of that firm:   |
| a)<br>bankrı  | Had a petition in bankruptcy issued or made a voluntary assignment in uptcy or any similar proceeding?   |
|               | Yes No D   |
|               | If "Yes", complete Schedule M, Item 16.1(a).   |
| b)<br>any sir | Made a proposal under any legislation relating to bankruptcy or insolvency on nilar proceeding?  |
|               | Yes No D   |
|               | If "Yes", complete Schedule M, Item 16.1(b).   |
| c)            | Been subject to proceedings under any legislation relating to the winding up o dissolution of the firm, or under the <i>Companies' Creditors Arrangement Ac</i> (Canada)?  |
|               | Yes No No  |
|               | If "Yes", complete Schedule M, Item 16.1(c).   |
| d)            | Been subject to or initiated any proceedings, arrangement or compromise with creditors? This includes having a receiver, receiver-manager, administrator of trustee appointed by or at the request of creditors, privately, through cour process or by order of a regulatory authority, to hold your assets.                 |
|               | Yes No No  |
|               | If "Yes", complete Schedule M, Item 16.1(d).   |

| 2. Debt obligations   |
|---|
| Over the past 10 years, have you failed to meet a financial obligation of \$5,000 or more as it came due or, to the best of your knowledge, has any firm, while you were a partner, director, officer or major shareholder of that firm, failed to meet any financial obligation of \$5,000 or more as it came due? |
| Yes No No   |
| If "Yes", complete Schedule M, Item 16.2.   |
| 3. Surety bond or fidelity bond   |
| Have you ever been refused for a surety or fidelity bond?   |
| Yes No No   |
| If "Yes", complete Schedule M, Item 16.3.   |
| 4. Garnishments, unsatisfied judgments or directions to pay   |
| Has any federal, provincial, territorial, state authority or court ever issued any of the following against you regarding your indebtedness or, to the best of your knowledge the indebtedness of a firm where you are or were a partner, director, officer or major shareholder:                                   |
| Yes No Garnishment  |
| Unsatisfied judgment  |
| Direction to pay  |
| If "Yes", complete Schedule M, Item 16.4.   |
|   |

# Item 17 Ownership of securities and derivatives firms

Are you now, or have you ever been, a partner or major shareholder of any firm (including your sponsoring firm) whose business is trading in or advising on securities or derivatives or both?

Yes No

If "Yes", complete Schedule N.

### Item 18 Agent for service

By submitting this form, you certify that in each jurisdiction of Canada where you have appointed an agent for service, you have completed the appointment of agent for service required in that jurisdiction.

## Item 19 Submission to jurisdiction

By submitting this form, you agree to be subject to the securities legislation or derivatives legislation or both of each jurisdiction of Canada, and to the by-laws, regulations, rules, rulings and policies (collectively referred to as "rules" in this form) of the SROs to which you have submitted this form. This includes the jurisdiction of any tribunals or any proceedings that relate to your activities as a registrant or a partner, director or officer of a registrant under that securities legislation or derivatives legislation or both or as an Approved Person under SRO rules.

## Item 20 Notice of collection and use of personal information

The personal information required under this form is collected on behalf of, and used by, the securities regulatory authorities in the jurisdictions set out in Schedule O to administer and enforce certain provisions of their securities legislation or derivatives legislation or both.

By submitting this form, the individual consents to the collection by the securities regulatory authorities of this personal information, and any police records, records from other government or non-governmental regulators or SROs, credit records and employment records about the individual that the securities regulatory authorities may need to complete their review of the information submitted in this form relating to the individual's continued fitness for registration or approval, if applicable, in accordance with the legal authority of the securities regulatory authorities while the individual is registered with or approved by it. Securities regulatory authorities may contact government and private bodies or agencies, individuals, corporations and other organizations for information about the individual.

If you have any questions about the collection and use of this information, contact the securities regulatory authority in any jurisdiction in which the required information is submitted. See Schedule O for details. In Québec, you can also contact the Commission d'accès à l'information at 1-888-528-7741 or visit its website at www.cai.gouv.qc.ca.

### **SROs**

The principal purpose for the collection of personal information is to assess your suitability for registration or approval and to assess your continued fitness for registration or approval in accordance with the applicable securities legislation and the rules of the SROs.

By submitting this form, you authorize the SROs to which this form is submitted to collect any information from any source whatsoever. This includes, but is not limited to, personal confidential information about you that is otherwise protected by law such as, police, credit, employment, education and proficiency course completion records, and records from other government or non-governmental regulatory authorities, securities commissions, stock exchanges, or other SROs, private bodies, agencies, individuals or corporations, as may be necessary for the SROs to complete their review of your form or continued fitness for registration or approval in accordance with their rules for the duration of the period you remain so registered or approved. You further consent to and authorize the transfer of confidential information between SROs, securities commissions or stock exchanges from whom you now, or may in the future, seek registration or approval, or with which you are currently registered or approved for the purpose of determining fitness or continued fitness for registration or approval or in connection with the performance of an investigation or other exercise of regulatory authority, whether or not you are registered with or approved by them.

By submitting this form, you certify that you understand the rules of the applicable SROs of which you are seeking registration or approval or of which your sponsoring firm is a member or participating organization. You also undertake to become conversant with the rules of any SROs of which you or your sponsoring firm becomes a member or participating organization. You agree to be bound by, observe and comply with these rules as they are from time to time amended or supplemented, and you agree to keep yourself fully informed about them as they are amended and supplemented. You submit to the jurisdiction of the SROs from whom you are seeking registration or approval, or of which your sponsoring firm is now or in the future becomes a member or participating organization and, wherever applicable, their Governors, Directors and Committees. You agree that any registration or approval granted pursuant to this form may be revoked, terminated or suspended at any time in accordance with the then applicable rules of the respective SROs. In the event of any such revocation or termination, you must terminate all activities which require registration or approval and, thereafter, not perform services that require registration or approval for any member of the SROs or any approved affiliated company or other affiliate of such member without obtaining the approval of or registration with the SROs, in accordance with their rules.

By submitting this form, you undertake to notify the SROs from whom you are seeking registration or approval or with which you are currently or may in the future be registered or approved of any material change to the information herein provided in accordance with their respective rules. You agree to the transfer of this form, without amendment, to other SROs in the event that at some time in the future you seek registration or approval from such other SROs.

You certify that you have discussed the questions in this form, together with this Agreement, with an Officer or Branch Manager of your sponsoring member firm and, to your knowledge and belief, the authorized Officer or Branch Manager was satisfied that you fully understood the questions and the terms of this Agreement. You further certify that your business activities that are subject to securities rules and derivatives rules or both will be limited strictly to those permitted by the category of your registration or approval.

It is an offence under securities legislation and/or derivatives legislation, including commodity futures legislation to give false or misleading information on this form.

### Item 22 Certification

### 1. Certification - NRD format

I confirm I have discussed the questions in this form with an officer, branch manager or supervisor of my sponsoring firm. To the best of my knowledge, the officer, branch manager or supervisor was satisfied that I fully understood the questions. I will limit my activities to those permitted by my category of registration.

I am making this submission as agent for the individual identified in this form. By checking this box, I certify that the individual provided me with all of the information on this form.

### 2. Certification - Format other than NRD format

#### Individual

By signing below, I certify to the regulator, or in Québec the securities regulatory authority, in each jurisdiction where I am filing or submitting this form, either directly or through the principal regulator, that:

- I have read this form and understand the questions, and
- all of the information provided on this form is true, and complete.

| Signature of individual | Date |  |
|-------------------------|------|--|

### Authorized partner or officer of the firm

By signing below, I certify to the regulator, or in Québec the securities regulatory authority, in each jurisdiction where I am submitting this form, either directly or through the principal regulator, for the individual that:

- the individual identified in this form will be engaged by the sponsoring firm as a registered individual or a permitted individual, and
- I have, or a branch manager, or supervisor, or another officer or partner has, discussed the questions set out in this form with the individual and, to the best of my knowledge, the individual fully understands the questions.

| Name of firm                                       |
|--|
| Name of authorized signing officer or partner      |
| Title of authorized signing officer or partner     |
| Signature of authorized signing officer or partner |
| Date signed(YYYY/MM/DD)                            |
| (1111/10101/DD)                                    |

# SCHEDULE A Names (Item 1)

# Item 1.2 Other personal names

| Name 1:                                       |          |                     |                      |             |          |
|---|----------|---------------------|----------------------|-------------|----------|
| Last name First (N/A )                        | t name   | Second name (N/A □) |                      | Third       | name     |
| Provide the reasons fo order, commonly used i |          |                     |                      | e, divorce  | e, court |
| When did you use this n                       | ame? Fro | m:                  | То:                  |             |          |
|   | (YY      | YY/MM)              | (YYYY/MM)            |             |          |
| Name 2:                                       |          |                     |                      |             |          |
| Last name First (N/A )                        | t name   | Second r            | name (N/A □)         | Third       | name     |
| Provide the reasons fo order, commonly used i |          |                     |                      | e, divorce  | e, court |
| When did you use this n                       | ame? Fro | m:                  | То:                  |             |          |
|   | (YY      | YY/MM)              | (YYYY/MM)            |             |          |
| Name 3:                                       |          |                     |                      |             |          |
| <br>Last name First<br>(N/A □)                | t name   | Second r            | ame (N/A □)          | Third       | name     |
| Provide the reasons fo order, commonly used i |          |                     | or example, marriage | e, divorce  | e, court |
| When did you use this n                       | ame? Fro | om:                 | То:                  |             |          |
|   | (YY      | YY/MM)              | (YYYY/MM)            | <del></del> |          |

# Item 1.3 Use of other names

| Name 1:                                 |                         |                                |
|---|-------------------------|--------------------------------|
| Name:                                   |                         |                                |
| Provide the reasons for the use name)?: |                         | example, trade name or team    |
| If this other name is or was used       |                         | h any sponsoring firm, did the |
| Yes No NA                               | ]                       |                                |
| When did you use this name?             | From:                   | То:                            |
|   | (YYYY/MM)               | (YYYY/MM)                      |
| Name 2:                                 |                         |                                |
| Name:                                   |                         |                                |
| Provide the reasons for the use name):  | of this other name (for | example, trade name or team    |
| If this other name is or was used       |                         | h any sponsoring firm, did the |
| Yes No No                               |                         |                                |
| When did you use this name?             | From:                   | То:                            |
|   | (YYYY/MM)               | (YYYY/MM)                      |
| Name 3:                                 |                         |                                |
| Name:                                   |                         |                                |

Provide the reasons for the use of this other name (for example, trade name or team name):

|  | (YYYY/MM) |          | /MM)       | -     |     |     |
|--|-----------|----------|------------|-------|-----|-----|
| When did you use this name?                                    | From:     | To:      |            |       |     |     |
| Yes No No  |           |          |            |       |     |     |
| If this other name is or was a sponsoring firm approve the use |           | with any | sponsoring | firm, | did | the |

# SCHEDULE B Residential address (Item 2)

# Item 2.1 Current and previous residential addresses

If you have lived at your current address for less than 10 years, list all previous addresses for the past 10 years.

You do not have to include a postal code or ZIP code, or a telephone number for any previous address.

| Residential address:               |                                     |                             |
|------------------------------------|-------------------------------------|-----------------------------|
| (number, stree                     | et, city, province, t               | erritory or state, country) |
| (                                  | .,, , , , , , , , , , , , , , , , , | ,                           |
| When did you live at this address? | From:                               | To:                         |
|                                    |                                     |                             |
|                                    | (YYYY/MM)                           | (YYYY/MM)                   |
| Address 2:                         |                                     |                             |
| Residential address:               |                                     |                             |
| (number, stree                     | et, city, province, t               | erritory or state, country) |
| When did you live at this address? | From:                               | To:                         |
|                                    |                                     |                             |
|                                    | (YYYY/MM)                           | (YYYY/MM)                   |
| Address 3:                         |                                     |                             |
| Residential address:               |                                     |                             |
|                                    |                                     | erritory or state, country) |
| When did you live at this address? | From:                               | То:                         |
|                                    | -                                   | _                           |
|                                    | (YYYY/MM)                           | (YYYY/MM)                   |

# SCHEDULE C Individual Categories (Item 6)

Check each category for which you are seeking registration, approval or review as a permitted individual.

| Categories common to all jurisdictions under securities legislation |
|---|
| Firm categories [Format other than NRD format only]                 |
| [ ] Investment Dealer   |
| [ ] Mutual Fund Dealer  |
| [ ] Scholarship Plan Dealer   |
| [ ] Exempt Market Dealer  |
| [ ] Restricted Dealer   |
| [ ] Portfolio Manager   |
| [ ] Restricted Portfolio Manager                                    |
| [ ] Investment Fund Manager   |
| Individual categories and permitted activities                      |
| [ ] Dealing Representative  |
| [ ] Advising Representative   |
| [ ] Associate Advising Representative                               |
| [ ] Ultimate Designated Person                                      |
| [ ] Chief Compliance Officer  |
| [ ] Officer – Specify title:  |
| [ ] Director  |
| [ ] Partner   |
| [ ] Shareholder   |
| [ ] Branch Manager (MFDA members only)                              |
| [ ] IIROC approval only   |
|   |
| IIROC   |
| Approval categories   |
| [ ] Executive   |
| [ ] Director (Industry)   |

| [ ] Director (Non-Industry)  |
|--|
| [ ] Supervisor   |
| [ ] Investor   |
| [ ] Registered Representative  |
| [ ] Investment Representative  |
| [ ] Trader   |
| Additional approval categories                                       |
| [ ] Chief Compliance Officer   |
| [ ] Chief Financial Officer  |
| [ ] Ultimate Designated Person                                       |
| Products   |
| [ ] Non-Trading  |
| [ ] Securities   |
| [ ] Options  |
| [ ] Futures Contracts and Futures Contract Options                   |
| [ ] Mutual Funds only  |
| Customer type  |
| [ ] Retail   |
| [ ] Institutional  |
| [ ] Not Applicable   |
| Portfolio management   |
| [ ] Portfolio Management   |
|  |
| Categories under local commodity futures and derivatives legislation |
| <u>Ontario</u>   |
| Firm categories  |
| [ ] Commodity Trading Adviser  |
| [ ] Commodity Trading Counsel  |
| [ ] Commodity Trading Manager  |
| [ ] Futures Commission Merchant                                      |

| Individual categories and permitted activities    |
|---|
| [ ] Advising Representative                       |
| [ ] Salesperson                                   |
| [ ] Branch Manager                                |
| [ ] Officer – Specify title:                      |
| [ ] Director                                      |
| [ ] Partner                                       |
| [ ] Shareholder                                   |
| [ ] IIROC approval only                           |
| <u>Manitoba</u>                                   |
| Firm categories                                   |
| [ ] Dealer (Merchant)                             |
| [ ] Dealer (Futures Commission Merchant)          |
| [ ] Dealer (Floor Broker)                         |
| [ ] Adviser                                       |
| [ ] Local   |
| Individual categories and permitted activities    |
| [ ] Floor Trader                                  |
| [ ] Salesperson                                   |
| [ ] Branch Manager                                |
| [ ] Adviser                                       |
| [ ] Officer – Specify title:                      |
| [ ] Director                                      |
| [ ] Partner                                       |
| [ ] Futures Contracts Portfolio Manager           |
| [ ] Associate Futures Contracts Portfolio Manager |
| [ ] IIROC approval only                           |
| [ ] Local   |
|   |

# Québec - activities relating to derivatives

For information purposes, indicate whether you will carry on activities as a

# representative of:

- [ ] An Investment Dealer Acting as a Derivatives Dealer
- [ ] A Portfolio Manager Acting as a Derivatives Portfolio Manager

# SCHEDULE D Address and agent for service (Item 7)

## Item 7.1 Address for service

You must have one address for service in each province or territory in which you are now, or are seeking to become, a registered individual or permitted individual. A post office box is not an acceptable address for service.

| Address for service                | :(number, str | eet, city, province or t                   | territory, postal cod | le)      |
|------------------------------------|---------------|--|-----------------------|----------|
| Telephone number                   | ~: ()         | Fax nu                                     | mber: ()              |          |
| E-mail address:                    |               |  |                       |          |
| Item 7.2 Agent fo                  | r service     |  |                       |          |
|                                    |               | for service, provide the provided above mu | 9                     |          |
| Name                               | of            | agent                                      | for                   | service: |
| (if applicable)  Contact person: _ |               |  |                       |          |
|                                    | Last name, F  |  |                       |          |

# SCHEDULE E Proficiency (Item 8)

# Item 8.1 Course, examination or designation information and other education

| Course, examination, designation or other education  | Date<br>completed<br>(YYYY/MM/DD) | Date<br>exempted<br>(YYYY/MM/DD) | Regulator / securities regulatory authority granting the exemption |
|--|-----------------------------------|----------------------------------|--|
|  |                                   |                                  |  |
|  |                                   |                                  |  |
|  |                                   |                                  |  |
| If you have listed the CFA Charbelow whether you are a current Charter.  | •                                 | _                                | ,  |
| Yes   No   |                                   |                                  |  |
| If "no", please explain why you no   | o longer hold this                | designation:                     |  |
|  |                                   |                                  |  |
|  |                                   |                                  |  |
| If you have listed the CIM designated below whether you are currently process. The second sec |                                   | •                                |  |
| 16   |                                   |                                  |  |
| If "no", please explain why you no   | o longer hold this                | designation:                     |  |
|  |                                   |                                  |  |
|  |                                   |                                  |  |

# SCHEDULE F Proficiency (Item 8.3 and 8.4)

# Item 8.3 Exemption refusal

Complete the following for each exemption that was refused.

| 1. Which securities regulator, derivatives regulator or SRO refused to grant the exemption? |
|---|
| State the name of the course, examination, designation or experience requirement:           |
| State the reason given for not being granted the exemption:                                 |
| Date exemption refused:(YYYY/MM/DD)   |
| 2. Which securities regulator, derivatives regulator or SRO refused to grant the exemption? |
| State the name of the course, examination, designation or experience requirement:           |
| State the reason given for not being granted the exemption:                                 |
| Date exemption refused:(YYYY/MM/DD)   |
| 3. Which securities regulator, derivatives regulator or SRO refused to grant the exemption? |

| State the name of the course, examination, designation or experience requirement:  |
|--|
| State the reason given for not being granted the exemption:  |
| Date exemption refused:(YYYY/MM/DD)  |
| Item 8.4 Relevant securities industry experience   |
| Describe your responsibilities in areas relating to the category you are applying for, including the title(s) you have held, as well as the start and end dates:                   |
|  |
| What is the percentage of your time devoted to these activities?   |
| %  |
| Indicate the continuing education activities which you have participated in during the last 36 months and which are relevant to the category of registration you are applying for: |
|  |

# SCHEDULE G Current employment, other business activities, officer positions held and directorships (Item 10)

Complete a separate Schedule G for each of your current business and employment activities with your sponsoring firm and with all other organizations. This includes any business related officer or director positions held, or any other equivalent positions held, whether you receive compensation or not.

| 1. Start date(YYYY/MM/DD)   |
|---|
| 2. Firm information   |
| ☐ Check here if this activity is employment with your sponsoring firm.  |
| If the activity is with your sponsoring firm, you are not required to indicate the firm name and address information below:   |
| Name of business or employer:   |
| Address of business or employer:  |
| Name and title of your immediate supervisor:  |
| 3. Description of duties  |
| Describe all employment and business activities related to this employer. Include the nature of the business and your duties, title or relationship with the business. If you are seeking registration that requires specific experience, include details with this firm such as level of responsibility, value of accounts under direct supervision, number of years of experience, and percentage of time spent on each activity. |
| 4. Number of work hours per week  |
| How many hours per week do you devote to this business or employment?   |
| If this activity is employment with your sponsoring firm and you work less than 30 hours per week, explain why.   |
|   |

# 5. Conflicts of interest

If you have more than one employer or are engaged in business related activities:

| A. Disclose any potential for confusion by clients and any potential for conflicts or interest arising from your multiple employment or business related activities or proposed business related activities. |
|--|
|  |
| B. Indicate whether or not any of your employers or organizations where you engage in business related activities are listed on an exchange.   |
| C. Confirm whether the firm has procedures for minimizing potential conflicts of interest and if so, confirm that you are aware of these procedures.   |
|  |
| D. State the name of the person at your sponsoring firm who has reviewed and approved your multiple employment or business related activities or proposed business related activities                        |
| E. If you do not perceive any conflicts of interest arising from this employment, explair why.   |
|  |

# SCHEDULE H Previous employment and other activities (Item 11)

Provide the following information for each of your employment and other activities in the past 10-years. Account for all of your time, including full-time and part-time employment, self-employment or military service. Include your status for each, such as unemployed, full-time student, or other similar statuses. Do not include short-term employment of four months or less while a student, unless it was in the securities, derivatives or financial industry.

In addition to the information required in the paragraph above, if you were employed or had business activities in the securities or derivatives industry or both during and before the 10-year period, disclose all your securities and derivatives or both employment or business activities (both before and during the 10-year period).

| <ul><li>☐ Unemployed</li><li>☐ Full-time student</li><li>☐ Employed or self-employed</li></ul> |
|--|
| From: (YYYY/MM)  |
| To: (YYYY/MM)  |
| Complete the following only if you are, or were, employed or self-employed during the period.  |
| Name of business or employer:  |
| Address of business or employer:   |
| (number, street, city, province, territory or state, country)                                  |
| Name and title of immediate supervisor, if applicable:   |
|  |

Describe the firm's business, your position, duties and your relationship to the firm. If you are seeking registration in a category of registration that requires specific experience, include details of that experience. Examples include level of responsibility, value of accounts under direct supervision, number of years of that experience and research experience, and percentage of time spent on each activity.

| Reason why you left the firm: |  |  |
|-------------------------------|--|--|
|                               |  |  |
|                               |  |  |
|                               |  |  |
|                               |  |  |

# SCHEDULE I Resignations and terminations (Item 12)

### Item 12.1

For each allegation of violation of any statutes, regulations, rules or internal/external standards of conduct, state below (1) the name of the firm from which you resigned, were terminated or dismissed for cause, (2) whether you resigned, were terminated or dismissed for cause, (3) the date you resigned, were terminated or dismissed for cause, and (4) the circumstances relating to your resignation, termination or dismissal for cause.

### Item 12.2

For each allegation of failure to supervise compliance with any statutes, regulations, rules or standards of conduct, state below, (1) the name of the firm from which you resigned, were terminated or dismissed for cause, (2) whether you resigned, were terminated or dismissed for cause, (3) the date you resigned, were terminated or dismissed for cause, and (4) the circumstances relating to your resignation, termination or dismissal for cause.

-----

## Item 12.3

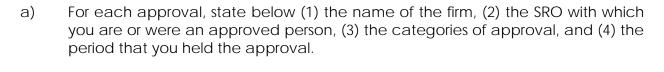
For each allegation of fraud or the wrongful taking of property, including theft, state below (1) the name of the firm from which you resigned, were terminated or dismissed for cause, (2) whether you resigned, were terminated or dismissed for cause, (3) the date you resigned, were terminated or dismissed for cause, and (4) the circumstances relating to your resignation, termination or dismissal for cause.

# SCHEDULE J Regulatory disclosure (Item 13)

# Item 13.1 Securities and derivatives regulation

| a) | For each registration or licence, state below (1) the name of the firm, (2) the securities or derivatives regulator with which you are, or were, registered or licensed, (3) the type or category of registration or licence, and (4) the period that you held the registration or licence.   |
|----|---|
| b) | For each registration or licence refused, state below (1) the name of the firm, (2) the securities or derivatives regulator that refused the registration or licence, (3)   |
|    | the type or category of registration or licence refused, (4) the date of the refusal, and (5) the reasons for the refusal.  |
| c) | For each exemption from registration denied or licence refused, other than what was disclosed in Item 8(3) of this form, state below (1) the party that was refused the exemption from registration or licence, (2) the securities or derivatives regulator that refused the exemption from registration or licence, (3) the type or category or registration or licence refused, (4) the date of the refusal, and (5) the reasons for the refusal.   |
| d) | For each order or disciplinary proceeding, state below (1) the name of the firm, (2) the securities or derivatives regulator that issued the order or is conducting or conducted the proceeding, (3) the date any notice of proceeding was issued, (4) the date any order or settlement was made, (5) a summary of any notice, order or settlement (including any sanctions imposed), (6) whether you are or were a partner, director, officer or major shareholder of the firm and named individually in the order or disciplinary proceeding, and (7) any other relevant details. |

### Item 13.2 SRO regulation



b) For each approval refused, state below (1) the name of the firm, (2) the SRO that refused the approval, (3) the category of approval refused, (4) the date of the refusal, and (5) the reasons for the refusal.

\_\_\_\_\_

c) For each order or disciplinary proceeding, state below (1) the name of the firm, (2) the SRO that issued the order or that is, or was, conducting the proceeding, (3) the date any notice of proceeding was issued, (4) the date any order or settlement was made, (5) a summary of any notice, order or settlement (including any sanctions imposed), (6) whether you are or were a partner, director, officer or major shareholder of the firm and named individually in the order or disciplinary proceeding, and (7) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.

### Item 13.3 Non-securities regulation

a) For each registration or licence, state below (1) the party who is, or was, registered or licensed (if insurance licensed, also indicate the name of the insurance agency), (2) with which regulatory authority, or under what legislation, the party is, or was, registered or licensed, (3) the type or category of registration or licence, and (4) the period that the party held the registration or licence.

b) For each registration or licence refused, state below (1) the party that was refused registration or licensing (if insurance licensed, also indicate the name of the insurance agency), (2) with which regulatory authority, or under what legislation, the registration or licence was refused, (3) the type or category of registration or licence refused, (4) the date of the refusal, and (5) the reasons for the refusal.

\_\_\_\_

c) For each order or disciplinary proceeding, indicate below (1) the party against whom the order was made or the proceeding taken (if insurance licensed, indicate the name of the insurance agency), (2) the regulatory authority that made the order or that is, or was, conducting the proceeding, or under what legislation the order was made or the proceeding is being, or was conducted, (3) the date any notice of proceeding was issued, (4) the date any order or settlement was made, (5) a summary of any notice, order or settlement (including any sanctions imposed), (6) whether you are or were a partner, director, officer or major shareholder of the firm and named individually in the order or disciplinary proceeding and (7) any other information that you think is relevant or that the regulatory authority may request.

# SCHEDULE K Criminal disclosure (Item 14)

### Item 14.1

For each charge, state below (1) the type of charge, (2) the date of the charge, (3) any trial or appeal dates, and (4) the court location.

### Item 14.2

For each finding of guilty, pleading no contest to, or granting of an absolute or conditional discharge from a criminal offence state below (1) the offence, (2) the date found guilty, and (3) the disposition (any penalty or fine and the date any fine was paid).

## Item 14.3

For each charge, state below (1) the name of the firm, (2) the type of charge, (3) the date of the charge, (4) any trial or appeal dates, and (5) the court location.

### Item 14.4

For each finding of guilty, pleading no contest to, or granting of an absolute or conditional discharge from a criminal offence state below (1) the name of the firm, (2) the offence, (3) the date of the conviction, and (4) the disposition (any penalty or fine and the date any fine was paid).

# SCHEDULE L Civil disclosure (Item 15)

### Item 15.1

For each outstanding civil proceeding, state below (1) the dates the statement of claim and statement of defence were issued, (2) the name of the plaintiff(s) in the proceeding, (3) whether the proceeding is pending or on appeal, (4) whether the proceeding was against a firm where you are, or were, a partner, director, officer or major shareholder and whether you have been named individually in the allegations, and (5) the jurisdiction where the action is being pursued.

\_\_\_\_\_

### Item 15.2

For each civil proceeding, state below (1) the dates the statement of claim and statement of defence were issued, (2) each plaintiff in the proceeding, (3) the jurisdiction where the action was pursued, (4) whether the proceeding was about a firm where you are, or were, a partner, director, officer or major shareholder and whether you have been named individually in the allegations and (5) a summary of any disposition or any settlement over \$10,000. You must disclose any actions settled without admission of liability.

# SCHEDULE M Financial Disclosure (Item 16)

# Item 16.1 Bankruptcy

| (a) | For each event, state below (1) the date of the petition or voluntary assignment, (2) the person or firm about whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a summary of any disposition or settlement, (7) date of discharge or release, if applicable, and (8) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request. |
|-----|--|
| (b) | For each event, state below (1) the date of the proposal, (2) the person or firm about whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a summary of any disposition or settlement, and (7) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.  |
| (c) | For each event, state below (1) the date of the proceeding, (2) the person or firm about whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a summary of any disposition or settlement, and (7) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.  |
| (d) | For each proceeding, arrangement or compromise with creditors, state below (1) the date of proceeding, (2) the person or firm about whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a summary of any disposition or settlement, and (7) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.                             |

# Item 16.2 Debt obligation

For each event, state below (1) the person or firm that failed to meet its financial obligation, (2) the amount that was owing at the time the person or firm failed to meet

its financial obligation, (3) the person or firm to whom the amount is, or was, owing, (4) any relevant dates (for example, when payments are due or when final payment was made), (5) any amounts currently owing, and (6) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request, including why obligation has not been met/satisfied.

### Item 16.3 Surety bond or fidelity bond

For each bond refused, state below (1) the name of the bonding company, (2) the address of the bonding company, (3) the date of the refusal, and (4) the reasons for the refusal.

# Item 16.4 Garnishments, unsatisfied judgments or directions to pay

For each garnishment, unsatisfied judgment or direction to pay regarding your indebtedness, indicate below (1) the amount that was owing at the time the garnishment, judgment or direction to pay was rendered, (2) the person or firm to whom the amount is, or was, owing, (3) any relevant dates (for example, when payments are due or when final payment was made), (4) the percentage of earnings to be garnished or the amount to be paid, (5) any amounts currently owing, and (6) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.

# SCHEDULE N Ownership of securities and derivatives firms (Item 17)

| Firm n | ame:                                       |   |   |                       |  |  |  |  |  |  |
|--------|--|---|---|-----------------------|--|--|--|--|--|--|
| What   | is your relatio                            | nship to the firm?                        | Partner                                       |                       | Major shareholder  |  |  |  |  |  |
| What   | is the period (                            | of this relationship?                     | ?   |                       |  |  |  |  |  |  |
|        | From:                                      | То:                                       | (if a   | (if applicable)       |  |  |  |  |  |  |
|        | (YYYY/MM)                                  | (YYYY/MM                                  | 1)  |                       |  |  |  |  |  |  |
| Provic | le the followir                            | ng information:                           |   |                       |  |  |  |  |  |  |
| a)     | partnership i<br>approved a<br>so approved | nterest you own o<br>s a result of the re | or propose to view of this for ate the source | acquire<br>orm. If ac | securities, or the amount of<br>when you are registered or<br>equiring shares when you are<br>kample, treasury shares, or if |  |  |  |  |  |
| b)     | debentures                                 |   | irm to be hel                                 |                       | ssary) of any subordinated<br>u or any other subordinated  |  |  |  |  |  |
| c)     |  | the person or firm                        | •   |                       | s to invest in the firm, provide<br>enship between you and that  |  |  |  |  |  |
|        |  |   |   |                       |  |  |  |  |  |  |
| d)     |  | s to be invested (c<br>any person or firm |   | o be inve             | ested) guaranteed directly or  |  |  |  |  |  |
|        | Yes  | No 🗌                                      |   |                       |  |  |  |  |  |  |
|        |  | ovide the name of                         | •   | n or firm             | and state the relationship   |  |  |  |  |  |

|                         |   |  |  | al code)                               |
|-------------------------|---|--|--|--|
| Reside                  | ntial addre                                 | ess:   |  |  |
| Last na                 | ame   | First name                                   | Second name<br>(if applicable)   | Third name<br>(if applicabl            |
| Name                    | of benefic                                  | al owner:                                    |  |  |
| If "Yes                 | , complete                                  | e (g), (h) and (i).                          |  |  |
| Yes                     | □ No  |  |  |  |
| •                       |   | than you the bene<br>or notes held by yo     | eficial owner of the shares,<br>ou?  | , bonds, debentur                      |
| you a                   | nd that pe                                  |  | person or firm, state the red<br>describe the rights that h  | ·                                      |
| Yes                     | □ No  |  |  |  |
| this paresult of hypoth | rtnership ir<br>of the revie<br>necation, p | nterest, or do you,<br>w of this form, inter | en up any rights relating to<br>when you are registered<br>and to give up any of these<br>ting as collateral the sec | d or approved a<br>e rights (including |

# Schedule O Contact information for Notice of collection and use of personal information

### **Alberta**

Alberta Securities Commission, Suite 600, 250-5<sup>th</sup> St. SW Calgary, AB T2P 0R4 Attention: Information Officer

Telephone: (403) 355-4151

### **British Columbia**

British Columbia Securities Commission P.O. Box 10142, Pacific Centre 701 West Georgia Street Vancouver, BC V7Y 1L2

Attention: Freedom of Information Officer Telephone: (604) 899-6500 or (800) 373-

6393 (in BC)

### Manitoba

The Manitoba Securities Commission 500 - 400 St. Mary Avenue Winnipeg, MB R3C 4K5 Attention: Director of Registrations Telephone (204) 945-2548 Fax (204) 945-0330

### **New Brunswick**

New Brunswick Securities Commission Suite 300, 85 Charlotte Street Saint John, NB E2L 2J2

Attention: Director, Regulatory Affairs

Telephone: (506) 658-3060

### Newfoundland and Labrador

Securities NL

Financial Services Regulation Division Department of Government Services P.O. Box 8700, 2nd Floor, West Block Confederation Building St. John's, NL A1B 4J6 Attention: Manager of Registrations

Tel: (709) 729-5661

### Nunavut

Legal Registries Division Department of Justice Government of Nunavut P.O. Box 1000 Station 570 Igaluit, NU XOA 0H0

Attention: Deputy Registrar of

Securities

Telephone: (867) 975-6590

### Ontario

Ontario Securities Commission Suite 1903, Box 55 20 Queen Street West Toronto, ON M5H 3S8

Attention: Compliance and Registrant

Regulation

Telephone: (416) 593-8314

e-mail: registration@osc.gov.on.ca

### **Prince Edward Island**

Securities Registry
Office of the Attorney General B
Consumer, Corporate and
Insurance Services Division
P.O. Box 2000
Charlottetown, PE C1A 7N8
Attention: Deputy Registrar of

Securities

Telephone: (902) 368-6288

### Québec

Autorité des marchés financiers 800, square Victoria, 22e étage C.P. 246, tour de la Bourse Montréal (Québec) H4Z 1G3

Attention: Responsable de l'accès à

l'information

Telephone: (514) 395-0337 or (877) 525-

0337 (in Québec)

### Saskatchewan

### Nova Scotia

Nova Scotia Securities Commission Suite 400, 5251 Duke Street Halifax, NS B3J 1P3

Attention: Deputy Director, Capital

Markets

Telephone: (902) 424-7768

### **Northwest Territories**

Government of the Northwest Territories P.O. Box 1320

Yellowknife, NWT X1A 2L9

Attention: Deputy Superintendent of

Securities

Telephone: (867) 920-8984

Saskatchewan Financial Services Commission Suite 601, 1919 Saskatchewan Drive Regina, SK S4P 4H2 Attention: Director

Telephone: (306) 787-5842

### Yukon

Office of the Yukon Superintendent of Securities Government of Yukon **Department of Community Services** 307 Black Street, 1st Floor PO Box 2703 (C-6) Whitehorse, Yukon Y1A 2C6 Attention: Superintendent of Securities Telephone: (867) 667-5466

Fax: (867)393-6521

http://www.community.gov.yk.ca/cor

p/securities\_about.htmll

### **Self-regulatory organization**

**Investment Industry Regulatory** Organization of Canada 121 King Street West, Suite 1600 Toronto, Ontario M5H 3T9 Attention: Privacy Officer Telephone: (416) 364-6133

E-mail: PrivacyOfficer@iiroc.ca

# FORM 33-109F5 CHANGE OF REGISTRATION INFORMATION (sections 3.1 and 4.1)

### **GENERAL INSTRUCTIONS**

Complete and submit this form to notify the relevant regulator(s) or, in Québec, the securities regulatory authority, or self-regulatory organization (SRO) of changes to information in the following forms:

- 1. Form 33-109F6, except for the changes set out in section 3.1 of National Instrument 33-109, or
- 2. Form 33-109F4.

### How to submit this form

To report changes to information in a Form 33-109F4, submit this form at the National Registration Database website in NRD format at <a href="https://www.nrd.ca">www.nrd.ca</a>.

Submit this form in a format other than NRD format to report changes to information in a:

- a) Form 33-109F6, or
- b) Form 33-109F4, if the individual is relying on the temporary hardship exemption in section 5.1 of National Instrument 31-102 [National Registration Database].

| Name of firm   |
|--|
| Registration categories  |
| NRD number (firm)  |
| Item 1 Type of form  |
| Check the form that is being updated:  |
| ☐ Form 33-109F6  |
| If submitting changes to Form 33-109F6, please attach a blackline of the amended sections of the form. |
| Form 33-109F4  |

### Item 2 Details of change

| Provide the item number and details for each change to the form selected above: |   |
|---|---|
| Item number Details   | _ |
| Effective date of change  |   |
| (YYYY/MM/DD)  |   |

### Item 3 Notice of collection and use of personal information

The personal information required under this form is collected on behalf of, and used by, the securities regulatory authorities in the jurisdictions set out in Schedule A to administer and enforce certain provisions of their securities legislation or derivatives legislation or both.

The personal information required under this form is also collected by and used by the SROs set out in Schedule A to administer and enforce their respective by-laws, regulations, rules, rulings and policies.

By submitting this form, the individual consents to the collection by the securities regulatory authorities or applicable SRO of this personal information, and any police records, records from other government or non-governmental regulators or SROs, credit records and employment records about the individual that the securities regulatory authorities or applicable SRO may need to complete their review of the information submitted in this form relating to the individual's continued fitness for registration or approval, if applicable, in accordance with the legal authority of the securities regulatory authorities while the individual is registered with or approved by it. Securities regulatory authorities or SROs may contact government and private bodies or agencies, individuals, corporations and other organizations for information about the individual.

If you have any questions about the collection and use of this information, contact the securities regulatory authorities or applicable SRO in any jurisdiction in which the required information is submitted. See Schedule A for details. In Québec, you can also contact the Commission d'accès à l'information at 1-888-528-7741 or visit its website at <a href="https://www.cai.gouv.qc.ca">www.cai.gouv.qc.ca</a>.

### Item 4 Warning

It is an offence under securities legislation and/or derivatives legislation, including commodity futures legislation to give false or misleading information on this form.

### Item 5 Certification

1. Use the following certification when submitting this form in NRD format when making changes to Form 33-109F4

| superv<br>branc | rm I have discussed the questions in this form with an officer, branch manager or visor of my sponsoring firm. To the best of my knowledge and belief, the officer, h manager or supervisor was satisfied that I fully understood the questions. I will by activities to those permitted by my category of registration. |
|-----------------|--|
|                 | I am making this submission as agent for the individual identified in this form. By checking this box, I certify that the individual provided me with all of the information on this form.   |
| 2.              | Use the following certification when submitting this form in a format other than NRD format when making changes to Form 33-109F6   |
| autho           | ining below I certify to each regulator or, in Québec, the securities regulatory rity, in each jurisdiction where I am submitting this form, either directly or through incipal regulator, that:   |
|                 | ave read this form and understand the questions, and of the information provided on this form is true, and complete.   |
| Name            | of firm  |
| Name            | of authorized signing officer or partner   |
| Title of        | authorized signing officer or partner  |
| Signat          | ure of authorized signing officer or partner   |
| Date s          | igned<br>(YYYY/MM/DD)  |
| 3.              | Use the following certification when submitting this form in a format other than NRD format under the temporary hardship exemption in section 5.1 of NI 31-102 when making changes to Form 33-109F4  |
| autho           | ning below, I certify to the regulator or, in Québec, the securities regulatory rity, in each jurisdiction where I am submitting this form, either directly or through incipal regulator, that:  |
|                 | ave read this form and understand the questions; and of the information provided on this form is true and complete.  |
| Signat          | ure of individual  |
| Date s          | signed<br>(YYYY/MM/DD)   |

### Schedule A Contact information for Notice of collection and use of personal information

### Alberta

Alberta Securities Commission, Suite 600, 250-5th St. SW Calgary, AB T2P 0R4

Attention: Information Officer Telephone: (403) 355-4151

### **British Columbia**

**British Columbia Securities** Commission P.O. Box 10142, Pacific Centre 701 West Georgia Street Vancouver, BC V7Y 1L2

Attention: Freedom of Information

Officer

Telephone: (604) 899-6500 or (800)

373-6393 (in BC)

### Manitoba

The Manitoba Securities Commission 500 - 400 St. Mary Avenue Winnipeg, MB R3C 4K5 Attention: Director of Registrations Telephone (204) 945-2548 Fax (204) 945-0330

### **New Brunswick**

New Brunswick Securities Commission Suite 300, 85 Charlotte Street Saint John, NB E2L 2J2 Attention: Director, Regulatory Affairs

Telephone: (506) 658-3060

### Newfoundland and Labrador

Securities NL

Financial Services Regulation Division Department of Government Services P.O. Box 8700, 2nd Floor, West Block Confederation Building St. John's, NL A1B 4J6 Attention: Manager of Registrations

Tel: (709) 729-5661

### Nunavut

Legal Registries Division Department of Justice Government of Nunavut P.O. Box 1000 Station 570 Igaluit, NU X0A 0H0

Attention: Deputy Registrar of

Securities

Telephone: (867) 975-6590

### Ontario

**Ontario Securities Commission** Suite 1903, Box 55 20 Queen Street West Toronto, ON M5H 3S8 Attention: Compliance and Registrant

Regulation

Telephone: (416) 593-8314

e-mail: registration@osc.gov.on.ca

### **Prince Edward Island**

Securities Registry Office of the Attorney General B Consumer, Corporate and Insurance Services Division P.O. Box 2000 Charlottetown, PE C1A 7N8 Attention: Deputy Registrar of

Securities

Telephone: (902) 368-6288

### Québec

Autorité des marchés financiers 800, square Victoria, 22e étage C.P. 246, tour de la Bourse Montréal (Québec) H4Z 1G3 Attention: Responsable de l'accès à l'information

Telephone: (514) 395-0337 or (877)

525-0337 (in Québec)

### Saskatchewan

Saskatchewan Financial Services

### Nova Scotia

Nova Scotia Securities Commission Suite 400, 5251 Duke Street Halifax, NS B3J 1P3

Attention: Deputy Director, Capital

Markets

Telephone: (902) 424-7768

### **Northwest Territories**

Government of the Northwest Territories P.O. Box 1320 Yellowknife, NWT X1A 2L9 Attention: Deputy Superintendent of

Securities

Telephone: (867) 920-8984

Commission

Suite 601, 1919 Saskatchewan Drive

Regina, SK S4P 4H2 Attention: Director

Telephone: (306) 787-5842

### Yukon

Office of the Yukon Superintendent of Securities
Government of Yukon
Department of Community Services
307 Black Street, 1st Floor
P.O. Box 2703 (C-6)
Whitehorse, YT Y1A 2C6
Attention: Superintendent of Securities

Telephone: (867) 667-5466

Fax: (867) 393-6251

http://www.community.gov.yk.ca/cor

p/securities\_about.html

### Self-regulatory organization

Investment Industry Regulatory Organization of Canada 121 King Street West, Suite 1600 Toronto, Ontario M5H 3T9 Attention: Privacy Officer Telephone: (416) 364-6133

E-mail: PrivacyOfficer@iiroc.ca

### Form 33–109F6 Firm registration

### Who should complete this form?

This form is for firms seeking registration under securities legislation, derivatives legislation or both.

Complete and submit this form to seek initial registration as a dealer, adviser or investment fund manager, or to add one or more jurisdiction of Canada or categories to a firm's registration.

### **Definitions**

Chief compliance officer – see section 2.1 of NI 31-103.

Derivatives – financial instruments, such as futures contracts (including exchange traded contracts), futures options and swaps whose market price, value or payment obligations are derived from or based on one or more underlying interests. Derivatives can be in the form of instruments, agreements or securities.

Firm - the person or company seeking registration.

Foreign jurisdiction – see National Instrument 14-101 Definitions

Form – Form 33-109F6 Firm registration.

Jurisdiction or jurisdiction of Canada-see National Instrument 14-101 Definitions.

NI 31-103 – National Instrument 31-103 Registration Requirements , Exemptions and Ongoing Registrant Obligations.

NI 33-109 – National Instrument 33-109 Registration Information.

NI 52-107 – National Instrument 52-107 Acceptable Accounting Principles and Auditing Standards.

NRD - National Registration Database. For more information, visit www.nrd-info.ca.

Parent – a person or company that directly or indirectly has significant control of another person or company.

Permitted individual - see NI 33-109.

Predecessor – any entity listed in question 3.6 of this form.

Principal Regulator - see NI 33-109.

Significant control – a person or company has significant control of another person or company if the person or company:

- ☐ directly or indirectly holds voting securities representing more than 20 per cent of the outstanding voting rights attached to all outstanding voting securities of the other person or company, or
- ☐ directly or indirectly is able to elect or appoint a majority of the directors (or individuals performing similar functions or occupying similar positions) of the other person or company.

Specified affiliate – a person or company that is a parent of the firm, a specified subsidiary of the firm, or a specified subsidiary of the firm's parent.

Specified subsidiary – a person or company of which another person or company has significant control.

SRO - see National Instrument 14-101 Definitions.

Ultimate designated person – see section 2.1 of NI 31-103.

You - the individual who completes, submits, files and/or signs the form on behalf of the firm.

We and the regulator - the securities regulatory authority or regulator in the jurisdiction(s) of Canada where the firm is seeking registration.

### Contents of the form

This form consists of the following:

Part 1 - Registration details

Part 2 - Contact information

Part 3 - Business history and structure

Part 4 - Registration history

Part 5 - Financial condition

Part 6 - Client relationships

Part 7 - Regulatory action

Part 8 - Legal action

Part 9 - Certification

Schedule A - Contact information for notice of collection and use of personal information

Schedule B - Submission to jurisdiction and appointment of agent for service

Schedule C - Form 31-103F1 Calculation of excess working capital

You are also required to submit the following supporting documents with your completed form:

- 1. Schedule B Submission to Jurisdiction and Appointment of Agent for Service for each jurisdiction where the firm is seeking registration (question 2.4)
- 2. Business plan, policies and procedures manual, and client agreements (British Columbia, Alberta, Manitoba and New Brunswick only) (question 3.3)
- 3. Constating documents (question 3.7)
- 4. Organization chart (question 3.11)
- 5. Ownership chart (question 3.12)
- 6. Calculation of excess working capital (question 5.1)
- 7. Directors' resolution approving insurance (question 5.7)
- 8. Audited financial statements (question 5.13)
- 9. Letter of direction to auditors (question 5.14)

### How to complete and submit the form

The firm is Al required to pay a registration fee in each jurisdiction of Canada ot where it is or submitting and filing this form.

Refer to the yorescribed fees of the applicable jurisdiction for details.

All dollar values are in Canadian dollars. If a question does not apply to the firm, write "n/a" in the space for the answer.

each jurisdiction If the firm is seeking registration in more than one jurisdiction of Canada or category, of Canada other than in the category of restricted dealer, you only need to complete and submit where it is one form. If the firm is seeking registration as a restricted dealer, submit and file the submitting and form with each jurisdiction of Canada where the firm is seeking that registration.

the You can complete this form:

- on paper and deliver it to the principal regulator or relevant SRO
- on paper, scan it and e-mail it to the principal regulator or SRO

If the firm is seeking registration in Ontario, and Ontario is not the firm's principal regulator, you must also file a copy of this form, without supporting documents, with the Ontario Securities Commission.

You can find contact information for submitting and filing the form in Appendix B of Companion Policy 33-109CP Registration Information.

We may accept the form in other formats. Please check with the regulator before you complete, submit and file the form. If you are completing the form on paper and need more space to answer a question, use a separate sheet of paper and attach it to this form. Clearly identify the question number.

You must include all supporting documents with your submission. We may ask you to provide other information and documents to help determine whether the firm is suitable for registration.

In most of this form, answers are required to questions which apply only to Canadian provinces and territories; you will find that the questions are referenced to "jurisdictions" or "jurisdiction of Canada". These refer to all provinces and territories of Canada. However, the questions in Part 4 – Registration History and Part 7 – Regulatory Action are to be answered in respect of any jurisdiction in the world.

It is an offence under securities legislation or derivatives legislation to give false or misleading information on this form.

See Part 3 of NI 33-109.

### Updating the information on the form

The firm is required to notify the regulator, within specified times, of any changes to the information on this form by submitting and filing Form 33-109F5 *Change of Registration Information.* 

### Collection and use of personal information

We and the SROs (if applicable) require personal information about the people referred to in this form as part of our review to determine whether the firm is suitable for registration. If the firm is approved, we also require this information to assess whether the firm continues to meet the registration requirements.

We may only:

- collect the personal information under the requirements in securities legislation or derivatives legislation or both
- use this information to administer and enforce provisions of the securities legislation or derivatives legislation or both

We may collect personal information from police records, records of other regulators or SROs, credit records, employment records, government and private bodies or agencies, individuals, corporations, and other organizations. We may also collect personal information indirectly.

We may provide personal information about the individuals referred to in this form to other regulators, securities or derivatives exchanges, SROs or similar organizations, if required for an investigation or other regulatory issue.

If anyone referred to in this form has any questions about the collection and use of their personal information, they can contact the regulator or SRO, if applicable, in the relevant jurisdiction of Canada. See Schedule A for details. In Québec, they can also contact the Commission d'accès à l'information du Québec at 1-888-528-7741 or visit its website at www.cai.gouv.gc.ca.

### Part 1 - Registration details

### 1.1 Firm's full legal name

For more information, visit Provide the full legal name of the firm as it appears on the firm's constating documents required under question 3.7. If the firm is a sole proprietorship, provide your first, last and any middle names.

If the firm's legal name is in English and French, provide both versions. 1.2 Firm's NRD number www.nrd-info.ca. 1.3 Why are you submitting this form? Complete: ☐ To seek initial registration as a firm in one or more jurisdictions of Canada The entire form ☐ To add one or more jurisdictions of Questions 1.1, 1.2, 1.4, 1.5 Canada to the firm's registration 2.4, 3.9, 5.4, 5.6\*, and Part 9 □ To add one or more categories to Questions 1.1, 1.2, 1.4, 1.5, the firm's registration 3.1, 5.1, 5.4, 5.5\*, 5.6\*, 5.7, 5.8, Part 6 and Part 9

<sup>\*</sup> If the firm is adding Québec as a jurisdiction for registration in the category of mutual fund dealer or scholarship plan dealer, complete question 5.6,

| 1.4     | In what | category | and | jurisdiction | is the | firm | seeking | registration? | Check | all |
|---------|---------|----------|-----|--------------|--------|------|---------|---------------|-------|-----|
| that ap | oply.   |          |     |              |        |      |         |               |       |     |

(a) Categories under securities legislation

|   |                                    |  |                            |                          |   |              | Jui   | risdic | tion       |        |       |       |       |      |
|---|------------------------------------|--|----------------------------|--------------------------|---|--------------|-------|--------|------------|--------|-------|-------|-------|------|
| Abbreviations<br>Alberta (AB)                     | Category                           | AB   | ВС                         | MB                       | NB  | NL           | NS    | NT     | NU         | ON     | PE    | QC    | SK    | ΥT   |
| British Columbia (BC)                             | Investme<br>dealer                 | nt 🗌   |                            |                          |   |              |       |        |            |        |       |       |       |      |
| Manitoba (MB)<br>New Brunswick<br>(NB)            | Mutual<br>fund<br>dealer           |  |                            |                          |   |              |       |        |            |        |       |       |       |      |
| Newfoundland<br>and Labrador<br>(NL)              | Scholarsh<br>plan dea              |  |                            |                          |   |              |       |        |            |        |       |       |       |      |
| Northwest<br>Territories (NT)<br>Nova Scotia (NS) | Exempt<br>market<br>dealer         |  |                            |                          |   |              |       |        |            |        |       |       |       |      |
| Nunavut (NU) Ontario (ON) Prince Edward           | Restricted<br>dealer               | d 🗌  |                            |                          |   |              |       |        |            |        |       |       |       |      |
| Island (PE) Québec (QC) Saskatchewan              | Investme<br>fund<br>manager        |  |                            |                          |   |              |       |        |            |        |       |       |       |      |
| (SK)<br>Yukon (YT)                                | Portfolio<br>manager               |  |                            |                          |   |              |       |        |            |        |       |       |       |      |
|   | Restricted<br>portfolio<br>manager | _  |                            |                          |   |              |       |        |            |        |       |       |       |      |
|   | (b) Cat                            | egories (  | under                      | deriva                   | vatives legislation (Manitoba and Ontario only) |              |       |        |            |        |       |       |       |      |
|   | De<br>De<br>De<br>Lo               | ategory ealer (mee ealer erchant) ealer (floo cal lviser | (futu                      | res                      | cor   | nmissi       |       | Mani   |            |        |       |       |       |      |
|   | Co<br>Co<br>Fu                     | ommodit<br>ommodit<br>ommodit<br>tures cor<br>estment c  | y trad<br>y trad<br>nmissi | ing co<br>ing m<br>on me | ounse<br>anag<br>ercha                          | er<br>nt     | nana( |        |            | ec on  | ıly)  |       |       |      |
|   |                                    | ne firm is<br>tfolio ma                                  |                            |                          |   |              |       |        | c as       | an inv | /estm | ent d | ealer | or a |
|   |                                    | ivatives d<br>ivatives p                                 |                            |                          | nage  | Yes<br>r Yes |       | :      | lo  <br>lo |        |       |       |       |      |

| 1.5  | Exemptions   |                                       |  |  |  |  |  |  |  |  |  |
|------|--|---------------------------------------|--|--|--|--|--|--|--|--|--|
|      | Is the firm applying for any exemp legislation?              | tions under securities or derivatives |  |  |  |  |  |  |  |  |  |
|      | Yes No   |                                       |  |  |  |  |  |  |  |  |  |
|      | If yes, provide the following information                    | for each exemption:                   |  |  |  |  |  |  |  |  |  |
|      | Type of exemption  |                                       |  |  |  |  |  |  |  |  |  |
|      | Legislation  |                                       |  |  |  |  |  |  |  |  |  |
|      | Jurisdiction(s) where the firm has applied for the exemption |                                       |  |  |  |  |  |  |  |  |  |
|      | AB BC MB NB NL NS NT   |                                       |  |  |  |  |  |  |  |  |  |
| Part | 2 - Contact information                                      |                                       |  |  |  |  |  |  |  |  |  |
|      | Addresses  |                                       |  |  |  |  |  |  |  |  |  |
| 2.1  | Head office address  |                                       |  |  |  |  |  |  |  |  |  |
|      | Address line 1   |                                       |  |  |  |  |  |  |  |  |  |
|      | Address line 2   |                                       |  |  |  |  |  |  |  |  |  |
|      | City   | Province/territory/state              |  |  |  |  |  |  |  |  |  |
|      | Country  | Postal/zip code                       |  |  |  |  |  |  |  |  |  |
|      | Telephone number   | Fax number                            |  |  |  |  |  |  |  |  |  |
|      | Website  |                                       |  |  |  |  |  |  |  |  |  |
|      | If the firm's head office is in Canada, go                   | o to question 2.3.                    |  |  |  |  |  |  |  |  |  |
|      | If the firm's head office is not in Canada                   | a, go to question 2.2.                |  |  |  |  |  |  |  |  |  |
| 2.2  | Firms whose head office is not in Canac                      | a                                     |  |  |  |  |  |  |  |  |  |
| (a)  | Does the firm have any business address                      | ses in Canada?                        |  |  |  |  |  |  |  |  |  |
|      | Yes No   |                                       |  |  |  |  |  |  |  |  |  |
|      | If yes, provide the firm's primary Canad                     | an business address:                  |  |  |  |  |  |  |  |  |  |
|      | Address line 1   |                                       |  |  |  |  |  |  |  |  |  |
|      | Address line 2   |                                       |  |  |  |  |  |  |  |  |  |

A post office box on its own is not acceptable for a

office

head

address.

|  |     | City   |                                      |                                      |                                  | Province/territory                    |                              |                           |                                |                            |                              |                               |                             |  |
|--|-----|--|--------------------------------------|--------------------------------------|----------------------------------|---------------------------------------|------------------------------|---------------------------|--------------------------------|----------------------------|------------------------------|-------------------------------|-----------------------------|--|
|  |     | Posta  | al cod                               | le                                   |                                  |                                       |                              |                           |                                |                            |                              |                               |                             |  |
|  |     |  |                                      |                                      |                                  |                                       |                              |                           |                                |                            |                              |                               |                             |  |
| The securities regulatory authority in this jurisdiction of Canada is the firm's principal regulator in Canada.  | (b) | first fir<br>in whi<br>currer  | nancia<br>ich th<br>nt fina<br>da in | al year<br>e firm<br>Incial<br>which | r since<br>expe<br>year.<br>most | e being<br>cts mo<br>In all<br>of the | g registost of other strings | stered<br>its cl<br>circu | d, indic<br>ients to<br>mstano | ate the bear<br>besees, in | ne juris<br>esider<br>dicate | diction<br>nt at t<br>e the j | n of C<br>he en<br>jurisdic | eted its<br>anada<br>d of its<br>ction of<br>ts most |
|  | 2.3 | Mailin   | ıg adc                               | lress                                |                                  |                                       |                              |                           |                                |                            |                              |                               |                             |  |
|  |     |  | Sa                                   | ame a                                | s the h                          | nead o                                | office                       | addre                     | ess                            |                            |                              |                               |                             |  |
| A post office box is acceptable for  |     | Addı   | ress lir                             | ne 1                                 |                                  |                                       |                              |                           |                                |                            |                              |                               |                             |  |
| a mailing address.   |     | Address line 2   |                                      |                                      |                                  |                                       |                              |                           |                                |                            |                              |                               |                             |  |
|  |     | City   |                                      |                                      |                                  |                                       |                              | Province/territory/state  |                                |                            |                              |                               |                             |  |
|  |     | Country  |                                      |                                      |                                  |                                       |                              | Postal                    | /zip co                        | ode                        |                              |                               |                             |  |
|  |     |  |                                      |                                      |                                  |                                       |                              |                           |                                |                            |                              |                               |                             |  |
| If the firm does not have an office in a jurisdiction of Canada where it is seeking registration, it must appoint an agent for service in that jurisdiction of Canada. | 2.4 | Address for service and agent for service  Attach a completed Schedule B Submission to Jurisdiction and Appointment of Agent for Service for each jurisdiction of Canada where the firm is seeking registration and does not have an office. |                                      |                                      |                                  |                                       |                              |                           |                                |                            |                              |                               |                             |  |
|  | 2.5 | Con  |                                      |                                      |                                  |                                       |                              |                           |                                |                            |                              |                               |                             |  |
|  | 2.5 | Ultima   |                                      |                                      | ed pe                            | rson                                  |                              |                           |                                |                            |                              |                               |                             |  |
| A registered firm must have an   |     |  | al nam                               |                                      |                                  |                                       |                              |                           |                                |                            |                              |                               |                             |  |
| individual registered in the   |     | Officer title  |                                      |                                      |                                  |                                       |                              |                           |                                |                            |                              |                               |                             |  |
| category of ultimate   |     |  |                                      | er, if a                             | availal                          | ble                                   |                              |                           |                                |                            |                              |                               |                             |  |
| designated person.   |     | Addı   |                                      |                                      | . ·                              |                                       |                              |                           |                                |                            |                              |                               |                             |  |
|  |     |  |                                      |                                      | firm he                          | ead of                                | ffice a                      | ddre                      | SS                             |                            |                              |                               |                             |  |
|  |     | Addı   | ress lir                             | ne 1_                                |                                  |                                       |                              |                           |                                |                            |                              |                               |                             |  |

Same as ultimate designated person

| Address line 2   |                          |
|------------------|--------------------------|
| City             | Province/territory/state |
| Country          | Postal/zip code          |
| Telephone number | E-mail address           |

### 2.6 Chief compliance officer

A registered firm must have an individual registered in the category of chief compliance officer.

| Legal name                       |                          |  |  |  |  |  |
|----------------------------------|--------------------------|--|--|--|--|--|
| Officer title                    |                          |  |  |  |  |  |
| NRD number, if available         |                          |  |  |  |  |  |
| Address                          |                          |  |  |  |  |  |
| Same as firm head office address |                          |  |  |  |  |  |
| Address line 1                   |                          |  |  |  |  |  |
| Address line 2                   |                          |  |  |  |  |  |
| City                             | Province/territory/state |  |  |  |  |  |
| Country                          | Postal/zip code          |  |  |  |  |  |
| Telephone number                 | E-mail address           |  |  |  |  |  |

## Part 3 - Business history and structure

### **Business activities**

### 3.1 The firm's business

Provide a description of the firm's proposed business, including its primary business activities, target market, and the products and services it will provide to clients.

### 3.2 Other names

In addition to the firm's legal name in question 1.1, does the firm use any other names, such as a trade name?

| Yes | □ No |  |
|-----|------|--|
|     |      |  |

| Business documents  |  |                        |
|---|--|------------------------|
|   | g documents to support its busines   | s oct                  |
| boes the ilith have the following   | g documents to support its busines   | s aci                  |
|   |  | Yes                    |
| (a) Business plan for at least th   | -  |                        |
|   | manual, including account the firm's policy on fairness in pportunities, if applicable   |                        |
| f no, explain why the firm does   | not have the document:   |                        |
|   |  |                        |
| orincipal regulator of the firm solan, policies and procedures investment policy statements ar  | pia, Alberta, Manitoba or New Bru<br>seeking registration, attach the fir<br>manual and client agreements, in<br>and investment management agree | m's k                  |
| orincipal regulator of the firm solan, policies and procedures investment policy statements and distory of the firm  When was the firm created?   | eeking registration, attach the fir<br>manual and client agreements, in  | m's k                  |
| orincipal regulator of the firm solan, policies and procedures investment policy statements are History of the firm   | eeking registration, attach the fir<br>manual and client agreements, in  | m's k                  |
| orincipal regulator of the firm solan, policies and procedures investment policy statements and distory of the firm  When was the firm created?   | eeking registration, attach the fir<br>manual and client agreements, in  | m's k                  |
| orincipal regulator of the firm solan, policies and procedures investment policy statements and distory of the firm  When was the firm created?  Tyyyy/mm/dd  | eeking registration, attach the fir<br>manual and client agreements, in  | m's k<br>nclud<br>emei |
| orincipal regulator of the firm solan, policies and procedures investment policy statements and History of the firm  When was the firm created?  Tyyyy/mm/dd  How was the firm created?  Wew start-up  Merger or amalgamation  Reorganization | Go to question 3.7. Go to question 3.6. Go to question 3.6. Go to question 3.6.  | m's k<br>nclud<br>emei |
| orincipal regulator of the firm solan, policies and procedures investment policy statements and History of the firm  When was the firm created?  Tyyyy/mm/dd  How was the firm created?  Wew start-up  Merger or amalgamation  Reorganization | Go to question 3.7. Go to question 3.6. Go to question 3.6. Go to question 3.6.  | m's k<br>nclud<br>emei |

### 3.7 Constating documents

Attach the legal documents that established the firm as an entity, for example, the firm's articles and certificate of incorporation, any articles of amendments, partnership agreement or declaration of trust. If the firm is a

sole proprietorship, provide a copy of the registration of trade name.

As part of their constating documents, firms whose head office is outside Canada may be required to provide proof of extra-provincial registration.

|   |      | Business structure ar   | nd owners       | hip                    |                           |
|---|------|---|-----------------|------------------------|---------------------------|
|   | 3.8  | Type of legal structure   |                 |                        |                           |
|   |      | Sole proprietorship Partnership Limited partnership Corporation Other | _               | neral partner _        |                           |
|   | 3.9  | Business registration numb  | er, if applicat | ole                    |                           |
| This is the firm's corporate registration |      | List the firm's business reg<br>where the firm is seeking re          |                 | nber for each          | jurisdiction of Canada    |
| number or<br>Québec                       |      | Business registration numb  | oer             | Jurisdiction of Canada |                           |
| enterprise<br>number (NEQ).               |      |   |                 |                        |                           |
| , ,                                       |      |   |                 |                        |                           |
|   |      |   |                 |                        |                           |
|   |      |   |                 |                        |                           |
|   | 3.10 | Permitted individuals   |                 |                        |                           |
|   |      | List all permitted individual   | s of the firm.  |                        |                           |
|   |      | Name  | Title           |                        | NRD number, if applicable |
|   |      |   |                 |                        |                           |

### 3.11 Organization chart

Attach an organization chart showing the firm's reporting structure. Include all permitted individuals, the ultimate designated person and the chief compliance officer.

### 3.12 Ownership chart

4.1

4.2

Attach a chart showing the firm's structure and ownership. At a minimum, include all parents, specified affiliates and specified subsidiaries.

Include the name of the person or company, and class, type, amount and voting percentage of ownership of the firm's securities.

### Part 4 – Registration history

The questions in Part 4 apply to any jurisdiction and any foreign jurisdiction.

| 1 113 33  |
|---|
| Securities registration   |
| In the last seven years, has the firm, or any predecessors or specified affiliates of the firm been registered or licensed to trade or advise in securities or derivatives? |
| Yes No No   |
| If yes, provide the following information for each registration:  |
| Name of entity  |
| Registration category   |
| Regulator/organization  |
| Date registered or licensed Expiry date, if applicable (yyyy/mm/dd) (yyyy/mm/dd)  |
| Jurisdiction  |
| Exemption from securities registration  |
| Is the firm currently relying on any exemptions from registration or licensing to trade or advise in securities or derivatives?   |
| Yes No No   |
|   |

If yes, provide the following information for each exemption:

### 4.3 Membership in an exchange or SRO

Type of exemption

Jurisdiction

Regulator/organization

Date of exemption (yyyy/mm/dd)

In the last seven years, has the firm, or any predecessors or specified affiliates

|   | organiz  |  |                              |                                  |                              |                                |       |                  |        |                                    |      |
|---|--|--|------------------------------|----------------------------------|------------------------------|--------------------------------|-------|------------------|--------|------------------------------------|------|
| Yes   |  | No   |                              |                                  |                              |                                |       |                  |        |                                    |      |
| If yes,   | provide  | the fo   | ollowin                      | g inform                         | ation fo                     | or each                        | า me  | mber             | ship:  |                                    |      |
| Nam   | e of en  | tity   |                              |                                  |                              |                                |       |                  |        |                                    |      |
| Orga  | anizatior                                      | า  |                              |                                  |                              |                                |       |                  |        |                                    |      |
| Date  | of mer   | nbersh   | ір (ууу                      | /y/mm/c                          | dd)                          | Expiry<br>(yyyy/               |       | date,<br>/dd)    | if     | applic                             | ak   |
| Juriso  | diction  |  |                              |                                  |                              | <u> </u>                       | Hin.  | <i>/ uu,</i>     |        |                                    |      |
|   | ties or d                                      |  |                              | ng on a<br>change                |                              |                                |       |                  |        | oership v                          | ∕vit |
| f yes,  | provide  | the fo   | ollowin                      | g inform                         | ation fo                     | or each                        | າ ex∈ | emptic           | on:    |                                    |      |
| Туре  | of exer  | nption   |                              |                                  |                              |                                |       |                  |        |                                    |      |
| Orga  | anizatior                                      | า  |                              |                                  |                              |                                |       |                  |        |                                    |      |
| Date  | of exer  | mption   | (уууу                        | /mm/dc                           | <u>(k</u>                    |                                |       |                  |        |                                    |      |
|   |  |  |                              |                                  |                              |                                |       |                  |        |                                    |      |
| Juriso  | diction  |  |                              |                                  |                              |                                |       |                  |        |                                    |      |
| Refusa<br>Has th<br>refuse<br>regula<br>Yes                   | al of regine firm, id regisator, sec           | or ar stration curities  | ny pre<br>n, lice<br>or deri | nsing o                          | ors or s<br>or men<br>exchar | specifie<br>nbershi<br>nge, SR | O or  | vith a<br>simila | ı fina | the firm<br>incial se<br>anization | erv  |
| Refusa<br>Has the<br>refuse<br>regula<br>Yes                  | al of regine firm, id regisator, sec           | or ar stration curities  | ny pre<br>n, lice<br>or deri | decessonsing o                   | ors or s<br>or men<br>exchar | specifie<br>nbershi<br>nge, SR | O or  | vith a<br>simila | ı fina | incial se                          | erv  |
| Refusa<br>Has the<br>refuse<br>regula<br>Yes<br>If yes,       | ne firm, d regis ator, sec  ne                 | or ar stration curities  | ny pre<br>n, lice<br>or deri | decessonsing o                   | ors or s<br>or men<br>exchar | specifie<br>nbershi<br>nge, SR | O or  | vith a<br>simila | ı fina | incial se                          | erv  |
| Refusa<br>Has the refuse regularity Yes<br>If yes, Nam        | ne firm, d regis ator, sec  provide            | or arstration curities  No [  e the foundation curities c | ny pre<br>n, lice<br>or deri | decessonsing o                   | ors or s<br>or men<br>exchar | specifie<br>nbershi<br>nge, SR | O or  | vith a<br>simila | ı fina | incial se                          | erv  |
| Refusa<br>Has the refuse regularies Yes If yes, Nam Reas Regu | ne firm, d regis ator, sec no provide e of ent | or arstration curities look the footnote the footnote tity   | ny pre<br>n, lice<br>or deri | decesso<br>nsing o<br>ivatives o | ors or s<br>or men<br>exchar | specifie<br>nbershi<br>nge, SR | O or  | vith a<br>simila | ı fina | incial se                          | erv  |

### 4.6 Registration for other financial products

Examples of other financial products include financial planning, life insurance and mortgages.

| In the last seven years, has the firm, or a of the firm been registered or licen registration or licensing to sell or advis securities or derivatives? | sed under legisla         | ition  | that requires |
|--|---------------------------|--------|---------------|
| Yes No D   |                           |        |               |
| If yes, provide the following information f  | or each registratio       | n or l | icence:       |
| Name of entity   |                           |        |               |
| Type of licence or registration  |                           |        |               |
| Regulator/organization   |                           |        |               |
| Date of registration (yyyy/mm/dd)  | Expiry date, (yyyy/mm/dd) | if     | applicable    |
| Jurisdiction   |                           |        |               |

### Part 5 - Financial condition

### Capital requirements

### 5.1 Calculation of excess working capital

Attach the firm's calculation of excess working capital.

- Investment dealers must use the capital calculation form required by the Investment Industry Regulatory Organization of Canada (IIROC).
- Mutual fund dealers must use the capital calculation form required by the Mutual Fund Dealers Association of Canada (MFDA), except for mutual fund dealers registered in Québec only
- Firms that are not members of either IIROC or the MFDA must use Form 31-103F1 Calculation of Excess Working Capital. See Schedule C.

### 5.2 Sources of capital

List all cash, cash equivalents, debt and equity sources of the firm's capital.

| Name of person or entity |                 |             |
|--------------------------|-----------------|-------------|
| providing the capital    | Type of capital | Amount (\$) |
|                          |                 |             |
|                          |                 |             |
|                          |                 |             |
|                          |                 |             |
|                          |                 |             |
|                          |                 |             |

### 5.3 Guarantors

See Schedule C Form 31-103F1 Calculation of Excess Working Capital. In relation to its business, does the firm:

|                                       | Yes | No |
|---------------------------------------|-----|----|
| (a) Have any guarantors?              |     |    |
| (b) Act as a guarantor for any party? |     |    |
| (b) Act as a guarantor for any party? |     |    |

If yes, provide the following information for each guarantee:

| Name of party to the guarantee |                          |
|--------------------------------|--------------------------|
| NRD number, if applicable      |                          |
| Time Hamber, ii applicable     |                          |
| Relationship to the firm       | Amount of guarantee (\$) |
| Details of the guarantee       |                          |

### Bonding and insurance

Questions 5.4 to 5.8 apply to the firm's bonding or insurance coverage or proposed bonding or insurance coverage for securities and derivatives activities only. This in accordance with Part 12, Division 2 of NI 31-103.

### 5.4 Jurisdictions covered

This information is on the financial institution bond.

Where does the firm have bonding or insurance coverage?

| AB |  |
|----|--|
| BC |  |
| MB |  |
| NB |  |
| NL |  |
| NS |  |
| NT |  |
| NU |  |
| ON |  |
| PE |  |
| QC |  |
| SK |  |
| ΥT |  |
|    |  |

If the firm's bonding or insurance does not cover all jurisdiction of Canada where it is seeking registration, explain why.

### 5.5 Bonding or insurance details

This information is on the binder of insurance or on the financial

| Name of insurer       |  |
|-----------------------|--|
| Bond or policy number |  |

institution bond.

| Specific insuring agreemen   | nts and cla               | iuses               |                      |
|--|---------------------------|---------------------|----------------------|
| Coverage for each claim  | (\$)                      | Annual aggregate    | coverage (\$)        |
| Total coverage (\$)  |                           |                     |                      |
| Amount of the deductible   | (\$)                      | Expiry date (yyyy/r | mm/dd)               |
| If the firm's insurance or proinstitution bond, explain how  |                           |                     |                      |
| Professional liability insurance  If the firm is seeking regists scholarship plan dealer, professional liability insurance | ration in C<br>rovide the | Québec as a mutua   |                      |
| Name of insurer  |                           |                     |                      |
| Policy number  |                           |                     |                      |
| Specific insuring agreemen   | nts and cla               | iuses               |                      |
| Coverage for each claim  | (\$)                      | Annual aggregate    | coverage (\$)        |
| Total coverage (\$)  |                           |                     |                      |
| Amount of the deductible   | (\$)                      | Renewal date (yyy   | ry/mm/dd)            |
| Jurisdictions covered:   |                           |                     |                      |
| AB BC MB NB NI  Which insurance policy ap  | pplies to yo              |                     | QC SK YT             |
| Firm's policy  Individ   | dual's polic              | y Both              |                      |
| Directors' resolution approv   | ing insuran               | ice                 |                      |
| Attach a directors' resolution coverage for its securities on  |                           |                     | sufficient insurance |
| Bonding or insurance claim   | s                         |                     |                      |
| In the last seven years, has insurance?  | the firm ma               | ade any claims aga  | inst a bond or on it |
| Yes □ No □   |                           |                     |                      |

If yes, provide the following information for each claim:

5.9

5.10

| Type of bond or insurance                            |   |
|--|---|
| Date of claim (yyyy/mm/dd)                           | Amount (\$)   |
| Reason for claim                                     |   |
| Date resolved Resu<br>(yyyy/mm/dd)                   | ult   |
| Jurisdiction   |   |
| Solvency   |   |
| bankruptcy, made an assignmen                        | m or any of its specified affiliates declared<br>t or proposal in bankruptcy, or been the<br>or the equivalent in any jurisdiction? |
| Yes No   |   |
| If yes, provide the following inform bankruptcy:     | nation for each bankruptcy or assignment in   |
| Name of entity                                       |   |
| Reason for bankruptcy or assignment                  | ent   |
| Date of bankruptcy, assignment petition (yyyy/mm/dd) | or Date discharge granted, if applicable (yyyy/mm/dd)   |
| Name of trustee                                      |   |
| Jurisdiction   |   |
| If applicable, attach a copy of any                  | discharge, release or equivalent document.  |
| Appointment of receiver                              |   |
|  | or any of its specified affiliates appointed a<br>lad one appointed, or the equivalent in any                                       |
| Yes No   |   |
| If yes, provide the following informa                | tion for each appointment of receiver:  |
| Name of entity                                       |   |
| Date of appointment (yyyy/mm/d                       | d) Reason for appointment   |
| Date appointment end (yyyy/mm/dd)                    | ed Reason appointment ended   |

Name of receiver or receiver manager

Jurisdiction

### Financial reporting

### 5.11 Financial year-end

| (mm/dd) |  |  |
|---------|--|--|
|         |  |  |

If the firm has not established its financial year-end, explain why.

Provide the name of the individual auditing the financial statements and the name of the firm, if applicable.

### 5.12 Auditor

Name of auditor and accounting firm

### 5.13 Audited financial statements

- (a) Attach, for your most recently completed year, either
  - (i) non-consolidated audited financial statements; or
  - (ii) audited financial statements prepared in accordance with section 3.2(3) of NI 52-107.
- (b) If the audited financial statements attached for item (a) were prepared for a period ending more than 90 days before the date of this application, also attach an interim financial report for a period of not more than 90 days before the date of this application.

If the firm is a start-up company, you can attach an audited opening statement of financial position instead.

### 5.14 Letter of direction to auditors

We may request an audit of the firm at any time while the firm is registered. Attach a letter of direction from the firm authorizing the auditor to conduct any audit or review of the firm that the regulator may request.

## Part 6 - Client relationships

### 6.1 Client assets

See Part 14, Division 3 of NI 31-103 and Companion Policy 31-103CP.

For guidance regarding whether a firm will hold or have access to client assets see section 12.4 of Companion Policy 31-103CP.

|      | Will the firm hold or have access to client   | assets?                                  |
|------|---|--|
|      | Yes No  |  |
|      | If yes, provide the following information trust accounts for client assets are held.  | for each financial institution where the |
|      | Name of financial institution   |  |
|      | Address line 1  |  |
|      | Address line 2  |  |
|      | City  | Province/territory                       |
|      | Postal code   | Telephone number                         |
| 6.2  | Conflicts of interest   |  |
|      | Does the firm have or expect to have a result in any significant conflicts of in activities in accordance with securities or  | terest in carrying out its registerable  |
|      | Yes No  |  |
|      | If yes, complete the following questions:   |  |
|      | (a) Provide details about each conflict   | t:                                       |
|      |   |  |
|      |   |  |
|      | (b) Does the firm have policies and pr conflicts of interest?   | ocedures to identify and respond to its  |
|      | Yes No If no, explain   | n why:                                   |
|      |   |  |
| Part | 7 - Regulatory action   |  |
|      | The questions in Part 7 apply to any jurisd information must be provided in respect of  |  |
| 7.1  | Settlement agreements   |  |
|      | Has the firm, or any predecessors or spec<br>settlement agreement with any finan<br>derivatives exchange, SRO or similar orga | ncial services regulator, securities or  |
|      | Yes No  |  |

If yes, provide the following information for each settlement agreement:

| Name of entity                  |
|---------------------------------|
| Regulator/organization          |
| Date of settlement (yyyy/mm/dd) |
| Details of settlement           |
| Jurisdiction                    |

### 7.2 Disciplinary history

Has any financial services regulator, securities or derivatives exchange, SRO or similar organization:

|     |   | Yes | No |
|-----|---|-----|----|
| (a) | Determined that the firm, or any predecessors or specified affiliates of the firm violated any securities regulations or any rules of a securities or derivatives exchange, SRO or similar organization?    |     |    |
| (b) | Determined that the firm, or any predecessors or specified affiliates of the firm made a false statement or omission?   |     |    |
| (c) | Issued a warning or requested an undertaking by the firm, or any predecessors or specified affiliates of the firm?  |     |    |
| (d) | Suspended or terminated any registration, licensing or membership of the firm, or any predecessors or specified affiliates of the firm?   |     |    |
| (e) | Imposed terms or conditions on any registration or membership of the firm, or predecessors or specified affiliates of the firm?   |     |    |
| (f) | Conducted a proceeding or investigation involving the firm, or any predecessors or specified affiliates of the firm?  |     |    |
| (g) | Issued an order (other than an exemption order) or a sanction to the firm, or any predecessors or specified affiliates of the firm for securities or derivatives-related activity (e.g. cease trade order)? |     |    |

If yes, provide the following information for each action:

| Name of entity              |                   |
|-----------------------------|-------------------|
| Type of action              |                   |
| Regulator/organization      |                   |
| Date of action (yyyy/mm/dd) | Reason for action |
| Jurisdiction                |                   |

| 7.3  | Ongoing investigations  |                                   |
|------|---|-----------------------------------|
|      | Is the firm aware of any ongoing investigations specified affiliates is the subject?  | s of which the firm or any of its |
|      | Yes No No   |                                   |
|      | If yes, provide the following information for each  | investigation:                    |
|      | Name of entity  |                                   |
|      | Reason or purpose of investigation  |                                   |
|      | Regulator/organization  |                                   |
|      | Date investigation commenced (yyyy/mm/dd)   |                                   |
|      | Jurisdiction  |                                   |
|      |   |                                   |
| Part | 8 - Legal action  |                                   |
|      | The firm must disclose offences or legal action the firm and its business activities in any jurisd provided in respect of the last 7 years. |                                   |
| 8.1  | Criminal convictions  |                                   |
|      | Has the firm, or any predecessors or specific convicted of any criminal or quasi-criminal offen   |                                   |
|      | Yes No C  |                                   |
|      | If yes, provide the following information for each  | conviction:                       |
|      | Name of entity  |                                   |
|      | Type of offence   |                                   |
|      | Case name   | Case number, if applicable        |
|      | Date of conviction (yyyy/mm/dd)   |                                   |
|      | Jurisdiction  |                                   |
| 8.2  | Outstanding criminal charges  |                                   |
|      | Is the firm or any of its specified affiliates currently criminal or quasi-criminal charges?  | y the subject of any outstanding  |
|      | Yes No No   |                                   |
|      | If yes, provide the following information for each  | charge:                           |
|      | Name of entity  |                                   |

| Type of offence             |  |
|-----------------------------|--|
| Date of charge (yyyy/mm/dd) |  |
| Jurisdiction                |  |

### 8.3 Outstanding legal actions

|   | Yes | No |
|---|-----|----|
| (a) Is the firm currently a defendant or respondent (or the equivalent in any jurisdiction) in any outstanding legal action?  |     |    |
| (b) Are any of the firm's specified affiliates currently a defendant or respondent (or the equivalent in any jurisdiction) in any outstanding legal action that involves fraud, theft or securities-related activities, or that could significantly affect the firm's business? |     |    |

If yes, provide the following information for each legal action:

| Name of entity                               |
|--|
| Type of legal action                         |
| Date of legal action (yyyy/mm/dd)            |
| Current stage of litigation                  |
| Remedies requested by plaintiff or appellant |
| Jurisdiction                                 |

### 8.4 Judgments

|   | Yes | No |
|---|-----|----|
| (a) Has any judgment been rendered against the firm or is any judgment outstanding in any civil court for damages or other relief relating to fraud, theft or securities-related activities?              |     |    |
| (b) Are any of the firm's specified affiliates currently the subject of any judgments that involve fraud, theft or securities-related activities, or that could significantly affect the firm's business? |     |    |

If yes, provide the following information for each judgment:

| Name of entity                             |
|--|
| Type of judgment                           |
| Date of judgment (yyyy/mm/dd)              |
| Current stage of litigation, if applicable |

Remedies requested by plaintiffs

### Part 9 - Certification

It is an offence under securities legislation or derivatives legislation to give false or misleading information on this form.

By signing below, you:

- 1. Certify to the regulator in each jurisdiction of Canada where the firm is submitting and filing this form, either directly or through the principal regulator, that:
  - you have read this form, and
  - to the best of your knowledge and after reasonable inquiry, all of the information provided on this form is true and complete.
- 2. Certify to each regulator in a non-principal jurisdiction of Canada where the firm is submitting and filing this form, either directly or through the principal regulator, that at the date of this submission:
  - the firm has submitted and filed all information required to be submitted and filed under the securities legislation or derivatives legislation or both of the principal jurisdiction of Canada in relation to the firm's registration in that jurisdiction, and
  - this information is true and complete.
- 3. Authorize the principal regulator to give each non-principal regulator access to any information the firm has submitted or filed with the principal regulator under securities legislation or derivatives legislation or both of the principal jurisdiction of Canada in relation to the firm's registration in that jurisdiction.
- 4. Acknowledge that the regulator may collect and provide personal information about the individuals referred to in this form under *Collection and use of personal information*.
- 5. Confirm that the individuals referred to in this form have been notified that their personal information is disclosed on this form, the legal reason for doing so, how it will be used and who to contact for more information.

| Name of firm                                      |         |
|---|---------|
| Name of firm's authorized signing officer or p    | partner |
| Title of firm's authorized signing officer or par | tner    |
| Signature   |         |
| Date (yyyy/mm/dd)                                 |         |

### Witness

The witness must be a lawyer, notary public or commissioner of oaths.

| Name of witness   |  |
|-------------------|--|
| Title of witness  |  |
| Signature         |  |
| Date (yyyy/mm/dd) |  |

### Schedule A Contact information for Notice of collection and use of personal information

### Alberta

Alberta Securities Commission, Suite 600, 250-5th St. SW Calgary, AB T2P 0R4 Attention: Information Officer

Telephone: (403) 355-4151

### **British Columbia**

British Columbia Securities Commission P.O. Box 10142, Pacific Centre 701 West Georgia Street Vancouver, BC V7Y 1L2

Attention: Freedom of Information Officer Telephone: (604) 899-6500 or (800) 373-6393 (in

BC)

### Manitoba

The Manitoba Securities Commission 500 - 400 St. Mary Avenue Winnipeg, MB R3C 4K5 Attention: Director of Registrations Telephone (204) 945-2548 Fax (204) 945-0330

### **New Brunswick**

New Brunswick Securities Commission Suite 300, 85 Charlotte Street Saint John, NB E2L 2J2 Attention: Director, Regulatory Affairs

Telephone: (506) 658-3060

### Newfoundland and Labrador

Securities NL

Financial Services Regulation Division Department of Government Services P.O. Box 8700, 2nd Floor, West Block Confederation Building St. John's, NL A1B 4J6

Attention: Manager of Registrations

Tel: (709) 729-5661

### Nova Scotia

Nova Scotia Securities Commission Suite 400, 5251 Duke Street Halifax, NS B3J 1P3

Attention: Deputy Director, Capital Markets

Telephone: (902) 424-7768

### Nunavut

Legal Registries Division Department of Justice Government of Nunavut P.O. Box 1000 Station 570 Igaluit, NU X0A 0H0

Attention: Deputy Registrar of Securities

Telephone: (867) 975-6590

### Ontario

**Ontario Securities Commission** Suite 1903, Box 55 20 Queen Street West Toronto, ON M5H 3S8

Attention: Compliance and Registrant Regulation

Telephone: (416) 593-8314

e-mail: registration@osc.gov.on.ca

### Prince Edward Island

Securities Registry

Office of the Attorney General B Consumer, Corporate

and

Insurance Services Division

P.O. Box 2000

Charlottetown, PE C1A 7N8

Attention: Deputy Registrar of Securities

Telephone: (902) 368-6288

### Québec

Autorité des marchés financiers 800, square Victoria, 22e étage C.P. 246, tour de la Bourse Montréal (Québec) H4Z 1G3

Attention: Responsable de l'accès à l'information Telephone: (514) 395-0337 or (877) 525-0337 (in Québec)

### Saskatchewan

Saskatchewan Financial Services Commission Suite 601, 1919 Saskatchewan Drive

Regina, SK S4P 4H2 Attention: Director

Telephone: (306) 787-5842

### **Northwest Territories**

Government of the Northwest Territories P.O. Box 1320

Yellowknife, NWT X1A 2L9

Attention: Deputy Superintendent of Securities

Telephone: (867) 920-8984

### Yukon

Office of the Yukon Superintendent of Securities Government of Yukon

Department of Community Services

307 Black Street, 1st Floor P.O. Box 2703 (C-6) Whitehorse, YT Y1A 2C6

Attention: Superintendent of Securities

Telephone: (867) 667-5466

Fax: (867) 393-6251

http://www.community.gov.yk/corp/securities\_about.html

### Self-regulatory organization

Investment Industry Regulatory Organization of Canada

121 King Street West, Suite 1600 Toronto, Ontario M5H 3T9 Attention: Privacy Officer

Telephone: (416) 364-6133 E-mail: PrivacyOfficer@iiroc.ca

# Schedule B Submission to jurisdiction and appointment of agent for service

| 1.     | Name  | e of person or company (the "Firm"):  |  |
|--------|---|---|--|
| 2.     | Jurisdiction of incorporation of the person or company:         |   |  |
| 3.     | Name of agent for service of process (the "Agent for Service"): |   |  |
| 4.     | Address for service of process on the Agent for Service:        |   |  |
|        | Phone   | e number of the Agent for Service:  |  |
| 5.     | upon<br>action<br>arising<br>waive                              | irm designates and appoints the Agent for Service at the address stated above as its agent whom may be served a notice, pleading, subpoena, summons or other process in any n, investigation or administrative, criminal, quasi-criminal or other proceeding (a "Proceeding") gout of or relating to or concerning the Firm's activities in the local jurisdiction and irrevocably es any right to raise as a defense in any such proceeding any alleged lack of jurisdiction to such Proceeding. |  |
| 6.     | quasi-<br>proce   | irm irrevocably and unconditionally submits to the non-exclusive jurisdiction of the judicial, -judicial and administrative tribunals of the local jurisdiction and any administrative eeding in the local jurisdiction, in any proceeding arising out of or related to or concerning the activities in the local jurisdiction.   |  |
| 7.     | Until s   | ix years after the Firm ceases to be registered, the Firm must file   |  |
|        | a.  | a new Submission to Jurisdiction and Appointment of Agent for Service in this form no later<br>than the 10th day after the date this Submission to Jurisdiction and Appointment of Agent<br>for Service is terminated; and  |  |
|        | b.  | an amended Submission to Jurisdiction and Appointment of Agent for Service no later<br>than the 10th day after any change in the name or above address of the Agent for<br>Service.   |  |
| 8.     |   | ubmission to Jurisdiction and Appointment of Agent for Service is governed by and construed cordance with the laws of the local jurisdiction.   |  |
| Dated  | :   |   |  |
| (Signa | ture of t   | the Firm or authorized signatory)   |  |
| (Name  | and Tit   | tle of authorized signatory)  |  |
| Accep  | tance   |   |  |
|        |   | ed accepts the appointment as Agent for Service of (Insert name of the Firm) under the terms as of the foregoing Submission to Jurisdiction and Appointment of Agent for Service.   |  |
| Dated  | :   |   |  |
| (Signa | ture of A   | Agent for Service or authorized signatory)  |  |
| (Name  | and Ti  | tle of authorized signatory)  |  |

### Schedule C FORM 31-103F1 Calculation of excess working capital

|       | Firm Name                      |   |
|-------|--------------------------------|---|
|       | Capital Calculation            |   |
| as at | with comparative figures as at | ) |

|     | Component  | Current period | Prior period |
|-----|--|----------------|--------------|
| 1.  | Current assets   | '              |              |
| 2.  | Less current assets not readily convertible into cash (e.g., prepaid expenses)   |                |              |
| 3.  | Adjusted current assets Line 1 minus line 2 =  |                |              |
| 4.  | Current liabilities  |                |              |
| 5.  | Add 100% of long-term related party debt unless the firm and the lender have executed a subordination agreement in the form set out in Appendix B and the firm has delivered a copy of the agreement to the regulator or, in Québec, the securities regulatory authority |                |              |
| 6.  | Adjusted current liabilities<br>Line 4 plus line 5 =   |                |              |
| 7.  | Adjusted working capital Line 3 minus line 6 =   |                |              |
| 8.  | Less minimum capital   |                |              |
| 9.  | Less market risk   |                |              |
| 10. | Less any deductible under the bonding or insurance policy required under Part 12 of National Instrument 31-103, Registration Requirements, Exemptions and Ongoing Registrant Obligations   |                |              |
| 11. | Less Guarantees  |                |              |
| 12. | Less unresolved differences  |                |              |
| 13. | Excess working capital   |                |              |

### Notes:

This form must be prepared using the accounting principles that you use to prepare your financial statements in accordance with National Instrument 52-107 Acceptable Accounting Principles and Auditing Standards. Section 12.1 of Companion Policy 31-103CP Registration Requirements, Exemptions and Ongoing Registrant Obligations provides further guidance in respect of these accounting principles.

- **Line 5. Related-party debt** Refer to the CICA Handbook for the definition of "related party" for publicly accountable enterprises.
- **Line 8. Minimum Capital** The amount on this line must be not less than (a) \$25,000 for an adviser and (b) \$50,000 for a dealer. For an investment fund manager, the amount must be not less than \$100,000 unless subsection 12.1(4) applies.
- **Line 9. Market Risk** The amount on this line must be calculated according to the instructions set out in Schedule 1 to this Form.
- Line 11. Guarantees If the registered firm is guaranteeing the liability of another party, the total amount of the guarantee must be included in the capital calculation. If the amount of a guarantee is included in the firm's statement of financial position as a current liability and is reflected in line 4, do not include the amount of the guarantee on line 11.
- **Line 12. Unresolved differences** Any unresolved differences that could result in a loss from either firm or client assets must be included in the capital calculation. The examples below provide guidance as to how to calculate unresolved differences:
  - (i) If there is an unresolved difference relating to client securities, the amount to be reported on Line 12 will be equal to the fair value of the client securities that are short, plus the applicable margin rate for those securities.
  - (ii) If there is an unresolved difference relating to the registrant's investments, the amount to be reported on Line 12 will be equal to the fair value of the investments (securities) that are short.
  - (iii) If there is an unresolved difference relating to cash, the amount to be reported on Line 12 will be equal to the amount of the shortfall in cash.

Please refer to section 12.1 of Companion Policy 31-103CP Registration Requirements, Exemptions and Ongoing Registrant Obligations for further guidance on how to prepare and file this form.

| Management Certification |               |                             |  |
|--------------------------|---------------|-----------------------------|--|
| Registered Firm Name:    |               |                             |  |
|                          |               | alculation and certify that |  |
| Name and Title  1        | Signature<br> | Date                        |  |
| 2                        |               |                             |  |

### Schedule 1 of Form 31-103F1 Calculation of Excess Working Capital (calculating line 9 [market risk])

For purposes of completing this form:

- (1) "Fair value" means the value of a security determined in accordance with Canadian GAAP applicable to publicly accountable enterprises.
- (2) For each security whose value is included in line 1, Current Assets, multiply the fair value of the security by the margin rate for that security set out below. Add up the resulting amounts for all of the securities you hold. The total is the "market risk" to be entered on line 9.

### (a) Bonds, Debentures, Treasury Bills and Notes

(i) Bonds, debentures, treasury bills and other securities of or guaranteed by the Government of Canada, of the United Kingdom, of the United States of America and of any other national foreign government (provided such foreign government securities are currently rated Aaa or AAA by Moody's Investors Service, Inc. or Standard & Poor's Corporation, respectively), maturing (or called for redemption):

within 1 year: 1% of fair value multiplied by the fraction

determined by dividing the number of days to

maturity by 365

over 1 year to 3 1% of fair value

vears:

over 3 years to 7 2% of fair value

years:

over 7 years to 11 4% of fair value

years:

over 11 years: 4% of fair value

(ii) Bonds, debentures, treasury bills and other securities of or guaranteed by any jurisdiction of Canada and obligations of the International Bank for Reconstruction and Development, maturing (or called for redemption):

within 1 year: 2% of fair value multiplied by the fraction

determined by dividing the number of days to

maturity by 365

over 1 year to 3 3% of fair value

years:

over 3 years to 7 4% of fair value

years:

over 7 years to 11 5% of fair value

years:

over 11 years: 5% of fair value

(iii) Bonds, debentures or notes (not in default) of or guaranteed by any municipal corporation in Canada or the United Kingdom maturing:

within 1 year: 3% of fair value multiplied by the fraction

determined by dividing the number of days to

maturity by 365

over 1 year to 3 5% of fair value

years:

over 3 years to 7 5% of fair value

years:

over 7 years to 11 5% of fair value

years:

over 11 years: 5% of fair value

- (iv) Other non-commercial bonds and debentures, (not in default): 10% of fair value
- (v) Commercial and corporate bonds, debentures and notes (not in default) and non-negotiable and non-transferable trust company and mortgage loan company obligations registered in the registered firm's name maturing:

within 1 year: 3% of fair value

over 1 year to 3 6% of fair value

years:

over 3 years to 7 7% of fair value

years:

over 7 years to 11 10% of fair value

years:

over 11 years: 10% of fair value

### (b) Bank Paper

Deposit certificates, promissory notes or debentures issued by a Canadian chartered bank (and of Canadian chartered bank acceptances) maturing:

within 1 year: 2% of fair value multiplied by the fraction determined by

dividing the number of days to maturity by 365

over 1 year: apply rates for commercial and corporate bonds,

debentures and notes

### (c) Acceptable foreign bank paper

Deposit certificates, promissory notes or debentures issued by a foreign bank, readily negotiable and transferable and maturing:

within 1 year: 2% of fair value multiplied by the fraction determined by

dividing the number of days to maturity by 365

over 1 year: apply rates for commercial and corporate bonds,

debentures and notes

"Acceptable Foreign Bank Paper" consists of deposit certificates or promissory notes issued by a bank other than a Canadian chartered bank with a net worth (i.e., capital plus reserves) of not less than \$200,000,000.

### (d) Mutual Funds

Securities of mutual funds qualified by prospectus for sale in any jurisdiction of Canada:

- (i) 5% of the net asset value per security as determined in accordance with National Instrument 81-106 Investment Fund Continuous Disclosure, where the fund is a money market mutual fund as defined in National Instrument 81-102 Mutual Funds; or
- (ii) the margin rate determined on the same basis as for listed stocks multiplied by the net asset value per security of the fund as determined in accordance with National Instrument 81-106 Investment Fund Continuous Disclosure.

### (e) Stocks

In this paragraph, "securities" includes rights and warrants and does not include bonds and debentures.

(i) On securities including investment fund securities, rights and warrants, listed on any exchange in Canada or the United States of America:

Long Positions - Margin Required

Securities selling at \$2.00 or more – 50% of fair value

Securities selling at \$1.75 to \$1.99 – 60% of fair value

Securities selling at \$1.50 to \$1.74 – 80% of fair value

Securities selling under \$1.50 – 100% of fair value

Short Positions - Credit Required

Securities selling at \$2.00 or more - 150% of fair value

Securities selling at \$1.50 to \$1.99 - \$3.00 per share

Securities selling at \$0.25 to \$1.49 - 200% of fair value

Securities selling at less than \$0.25 – fair value plus \$0.25 per shares

- (ii) For positions in securities that are constituent securities on a major broadly-based index of one of the following exchanges, 50% of the fair value:
  - (a) Australian Stock Exchange Limited
  - (b) Bolsa de Madrid
  - (c) Borsa Italiana
  - (d) Copenhagen Stock Exchange
  - (e) Euronext Amsterdam
  - (f) Euronext Brussels
  - (g) Euronext Paris S.A.
  - (h) Frankfurt Stock Exchange
  - (i) London Stock Exchange
  - (j) New Zealand Exchange Limited
  - (k) Stockholm Stock Exchange
  - (I) Swiss Exchange
  - (m) The Stock Exchange of Hong Kong Limited
  - (n) Tokyo Stock Exchange

### (f) Mortgages

- (i) For a firm registered in any jurisdiction of Canada except Ontario:
  - (a) Insured mortgages (not in default): 6% of fair value
  - (b) Mortgages which are not insured (not in default): 12% of fair value of the loan or the rates set by Canadian financial institutions or Schedule III banks, whichever is greater.
- (ii) For a firm registered in Ontario:
  - (a) Mortgages insured under the National Housing Act (Canada) (not in default): 6% of fair value
  - (b) Conventional first mortgages (not in default): 12% of fair value of the loan or the rates set by Canadian financial institutions or Schedule III banks, whichever is greater.

If you are registered in Ontario regardless of whether you are also registered in another jurisdiction of Canada, you will need to apply the margin rates set forth in (ii) above.

(g) For all other securities – 100% of fair value.

# FORM 33-109F7 REINSTATEMENT OF REGISTERED INDIVIDUALS AND PERMITTED INDIVIDUALS (sections 2.3 and 2.5(2))

### **GENERAL INSTRUCTIONS**

Complete and submit this form to the relevant regulator(s) or in Québec, the securities regulatory authority, or self-regulatory organization (SRO) if an individual has left a sponsoring firm and is seeking to reinstate their registration in the same category or reinstate their same status of permitted individual as before with a sponsoring firm. You only need to complete and submit one form regardless of the number of registration categories or permitted individual statuses you are seeking to be reinstated in.

An individual may reinstate their registration or permitted individual status by submitting this form. This form may only be used if all of the following apply:

- 1. this form is submitted on or before the end of three months after the cessation date of the individual's employment, partnership or agency relationship with the individual's former sponsoring firm,
- there have been no changes to the information previously submitted in respect of Items 13 (Regulatory Disclosure), 14 (Criminal Disclosure), 15 (Civil Disclosure) and 16 (Financial Disclosure) of the individual's Form 33-109F4 since the individual left their former sponsoring firm, and
- 3. the individual's employment, partnership or agency relationship with their former sponsoring firm did not end because the individual was asked by the firm to resign, resigned voluntarily or was dismissed, following an allegation against the individual of criminal activity, a breach of securities legislation, or a breach of the rules of an SRO.

If you do not meet all of the above conditions then you must apply for reinstatement by completing on NRD a Form 33-109F4 by making the NRD submission entitled 'Reactivation of Registration'.

#### Terms

In this form, "you", "your" and "individual" means the individual who is seeking to reinstate their registration or their status as permitted individual.

"former sponsoring firm" means the registered firm where you most recently carried out duties as a registered or permitted individual.

"major shareholder" and "shareholder" mean a shareholder who, in total, directly or indirectly owns voting securities carrying 10 per cent or more of the votes carried by all outstanding voting securities.

"new sponsoring firm" means the registered firm where you will begin carrying out duties as a registered or permitted individual when your registration or permitted individual status is reinstated.

Several terms used in this form are defined in the Form 33-109F4 [Registration of Individuals and Review of Permitted Individuals] that you submitted when you first became registered or elsewhere in the securities legislation of your province or territory. Please refer to those definitions.

#### How to submit this form

### NRD format

Submit this form at the National Registration Database (NRD) website in NRD format at www.nrd.ca. If you have any questions, contact the compliance, registration or legal department of the new sponsoring firm or a legal adviser, or visit the NRD information website at www.nrd-info.ca.

### Format, other than NRD format

If you are relying on the temporary hardship exemption in section 5.1 of National Instrument 31-102 *National Registration Database*, you may submit this form in a format other than NRD format.

If you need more space, use a separate sheet of paper. Clearly identify the Item and question number. Complete and sign the form, and send it to the relevant regulator(s) or, in Québec, the securities regulatory authority, SRO (s) or similar authority. The number of originally signed copies of the form you are required to submit depends on the province or territory, and on the regulator, the securities regulatory authority or SRO.

To avoid delays in processing this form, be sure to answer all of the items that apply to you. If you have questions, contact the compliance, registration or legal department of the new sponsoring firm or a legal adviser, or visit the National Registration Database information website at www.nrd-info.ca.

| Item 1  | Name        |            |                     |       |      |
|---------|-------------|------------|---------------------|-------|------|
| 1.      | NRD number: |            |                     |       |      |
| 2.      | Legal name  |            |                     |       |      |
| Last na | _           | First name | Second name (N/A □) | Third | name |

3. **Date of birth** (YYYY/MM/DD):

### 4. Use of other names

| under, a nam   | ne other th  | or have you ever used, operated under, or carried on business<br>an the name(s) mentioned above (for example, trade names<br>r team names)? |
|--|--|---|
| Yes  | □ No   |   |
| If "yes"   | , complete   | e Schedule A.   |
| Item 2   | Number of  | jurisdictions   |
| 1. Are you se than one jurise  | _  | einstate your registration or permitted individual status in more Canada?   |
| Yes  | □ No   |   |
| registration or individual:  All jurise Alberta British ( Manito New Br Newfo Northw Nova S Nunav Prince Québe | reinstatem<br>dictions<br>a<br>Columbia<br>ba<br>unswick<br>undland ai<br>vest Territori<br>icotia<br>ut<br>o<br>Edward Isla |   |

### Item 3 Individual categories

- 1. On Schedule B, check each category for which you are seeking to reinstate your registration or permitted individual status. If you are seeking reinstatement of status as a permitted individual, check each category that describes your position with your new sponsoring firm.
- 2. If you are seeking reinstatement as a representative of a mutual fund dealer or of a scholarship plan dealer in Québec, are you covered by your new sponsoring firm's professional liability insurance?

| Yes No No  |
|--|
| If "No", state:  |
| The name of your insurer   |
| Your policy number   |
| Item 4 Address and agent for service   |
| 1. Address for service   |
| You must have one address for service in each province or territory where you are submitting this form. A residential or business address is acceptable. A post office box is not acceptable. Complete Schedule C for each additional address for service you are providing.   |
| Address for service:   |
| (number, street, city, province or territory, postal code)   |
| Telephone number Fax number, if applicable   |
| E-mail address, if available   |
| 2. Agent for service   |
| If you have appointed an agent for service, provide the following information for the agent in each province or territory where you have an agent for service. The address of your agent for service must be the same as the address for service above. If your agent for service is not an individual, provide the name of your contact person. |
| Name of agent for service:   |
| Contact person:  |
| Last name, First name  |

1. Provide the following information for your new sponsoring firm. If you will be working

### Item 5 Location of employment

out of more than one location, provide the following information for the location out of which you will be doing most of your business. Unique Identification Number (optional): \_\_\_\_\_ NRD location number: \_\_\_\_\_ **Business address:** (number, street, city, province, territory or state, country, postal code) Telephone number: ( ) Fax number: ( ) 2. If the new sponsoring firm has a foreign head office, and/or you are not a resident of Canada, provide the address for the location in which you will be conducting business. Business address: (number, street, city, province, territory or state, country, postal code) Telephone number: ( ) Fax number: ( ) [The following under #3 "Type of location", #4 and #5 is for a Format other than NRD format only] **3.** Type of location: ☐ Head office ☐ Branch or Business Location ☐ Sub-branch 4. Name of branch manager: \_\_\_\_\_\_ 5. Check here if the mailing address of the location is the same as the business address provided above. Otherwise, complete the following: Mailing address: (number, street, city, province, territory or state, country, postal code) **Previous employment** Item 6 Provide the following information for your former sponsoring firm. Name:

| Date on which you were no longer authorized to act on behalf of your former sponsoring firm as a registered individual or permitted individual:   |
|---|
| (YYYY/MM/DD)  |
| The reason why you left your former sponsoring firm:  |
| Item 7 Current employment, other business activities, officer positions held and directorships  |
| Name of your new sponsoring firm:   |
| Complete a separate Schedule D for each of your current business and employment activities, including employment and business activities with your new sponsoring firm and any employment and business activities outside your new sponsoring firm. Also include all business related officer or director positions and any other equivalent positions held, whether you receive compensation or not. |
| Item 8 Ownership of securities in new sponsoring firm   |
| Are you a partner or major shareholder of your new sponsoring firm?   |
| Yes No No   |
| If "Yes", complete Schedule E.  |
| Item 9 Confirm permanent record   |
| 1. Check the appropriate box to indicate that, since leaving your former sponsoring firm, there has been a change to any information previously submitted for the items of your Form 33-109F4 that are listed below.  |
| Regulatory disclosure (Item 13)   |
| Criminal disclosure (Item 14)   |
| Civil disclosure (Item 15)  |
| Financial disclosure (Item 16)  |
| 2. Check the box below - <i>I am eligible to file this Form 33-109F7</i> , only if you satisfy both of the following conditions:  |
| (a) there are no changes to any of the disclosure items under Item 9.1 above, and   |

- (b) your employment, partnership or agency relationship with your former sponsoring firm did not end because you were asked by the firm to resign or resigned voluntarily, or were dismissed, following an allegation against you of
  - criminal activity,
  - a breach of securities legislation, or
  - a breach of the rules of an SRO.

If you do not meet the above conditions for selecting the box 'I am eligible to file this Form 33-109F7', then you must apply for reinstatement by completing on NRD a Form 33-109F4 by making the NRD submission entitled 'Reactivation of Registration'. If you are submitting a Form 33-109F4 in a format other than NRD format you must complete the entire form.

I am eligible to file this Form 33-109F7.

### Item 10 Acknowledgements, submission to jurisdiction and notice of collection and use of personal information

By submitting this form, you:

- acknowledge that the submission to jurisdiction, consent to collection and use of personal information, and authorization in respect of SROs (to the extent applicable) that you provided in your Form 33-109F4 remain in effect and extend to this form
- consent to the collection and disclosure of your personal information by regulators and by your sponsoring firm, in each case, for registration and other related regulatory purposes.

If you have any questions about the collection and use of your personal information, contact the securities regulatory authority or applicable SRO in the relevant jurisdiction. See Schedule F for details. In Québec, you can also contact the Commission d'accès à l'information at 1-888-528-7741 or visit its website at www.cai.gouv.qc.ca.

You acknowledge and agree that if you are seeking reinstatement of your registration and it was subject to any undischarged terms and conditions when you left your former sponsoring firm, those terms and conditions will remain in effect at your new sponsoring firm.

### Item 11 Warning

It is an offence under securities legislation and/or derivatives legislation, including commodity futures legislation, to give false or misleading information on this form.

#### Item 12 Certification

Date signed\_\_\_

(YYYY/MM/DD)

| 1 | Certification | - NRD forma | ıt. |
|---|---------------|-------------|-----|
|   |               |             |     |

| 1. Certification - NRD format:   |
|--|
| I confirm I have discussed the questions in this form with an officer, branch manager or supervisor of my sponsoring firm. To the best of my knowledge, the officer, branch manager or supervisor was satisfied that I fully understood the questions. I will limit my activities to those permitted by my category of registration.   |
| I am making this submission as agent for the individual. By checking this box, I certify that the individual provided me with all of the information on this form.   |
| 2. Certification - Format other than NRD format:   |
| Individual  By signing below, I certify to the regulator, or in Québec the securities regulatory authority, in each jurisdiction where I am submitting this form, either directly or through the principal regulator that:   |
| <ul> <li>I have read the form and understand the questions, and</li> <li>all of the information provided on this form is true, and complete.</li> </ul>  |
| Signature of individualDate signed(YYYY/MM/DD)   |
| Authorized partner or officer of the new sponsoring firm  By signing below, I certify to the regulator, or in Québec the securities regulatory authority, in each jurisdiction where I am submitting this form for the individual that:  |
| <ul> <li>the individual will be engaged by the new sponsoring firm as a registered individual or a permitted individual</li> <li>I have, or a branch manager or another officer or supervisor has, discussed the questions set out in this form with the individual and, to the best of my knowledge, the individual fully understands the questions, and</li> <li>the new sponsoring firm understands that if the individual's reinstatement of registration was subject to any undischarged terms and conditions when the individual left their former sponsoring firm, those terms and conditions remain in effect and agrees to assume any ongoing obligations that apply to the sponsoring firm in respect of the individual under those terms and conditions.</li> </ul> |
| Name of authorized signing officer or partner  |
| Title of authorized signing officer or partner   |
| Signature of authorized signing officer or partner   |

# SCHEDULE A Use of other names (Item 1.4)

### Item 1.4 Use of other names

| Name 1:                                 |                         |                                |
|---|-------------------------|--------------------------------|
| Name:                                   |                         |                                |
| Provide the reasons for the use name)?: |                         | example, trade name or team    |
| If this other name is or was use        |                         | n any sponsoring firm, did the |
| Yes No                                  |                         |                                |
| When did you use this name?             | From:                   | То:                            |
|   | (YYYY/MM)               | (YYYY/MM)                      |
| Name 2:                                 |                         |                                |
| Name:                                   |                         |                                |
| Provide the reasons for the use name):  | of this other name (for | example, trade name or team    |
| If this other name is or was use        |                         | n any sponsoring firm, did the |
| Yes No                                  |                         |                                |
| When did you use this name?             | From:                   | To:                            |
|   | (YYYY/MM)               | (YYYY/MM)                      |
| Name 3:                                 |                         |                                |
| Name:                                   |                         |                                |

Provide the reasons for the use of this other name (for example, trade name or team name):

### SCHEDULE B Individual Categories (Item 3)

Check each category for which you are seeking reinstatement of registration, approval or permitted individual status

Categories Common to all jurisdictions under securities legislation Firm categories [Format other than NRD format only] [ ] Investment Dealer [ ] Mutual Fund Dealer [ ] Scholarship Plan Dealer [ ] Exempt Market Dealer [ ] Restricted Dealer [ ] Portfolio Manager [ ] Restricted Portfolio Manager [] Investment Fund Manager Individual categories and permitted activities [ ] Dealing Representative [ ] Advising Representative [ ] Associate Advising Representative [ ] Ultimate Designated Person [ ] Chief Compliance Officer [ ] Officer – Specify title: [ ] Director [ ] Partner [] Shareholder [ ] Branch Manager (MFDA members only) [ ] IIROC approval only **IIROC** Approval categories

[ ] Executive

| [ ] Director (Industry)  |
|--|
| [ ] Director (Non-Industry)  |
| [ ] Supervisor   |
| [ ] Investor   |
| [ ] Registered Representative  |
| [ ] Investment Representative  |
| [ ] Trader   |
| Additional approval categories                                       |
| [ ] Chief Compliance Officer   |
| [ ] Chief Financial Officer  |
| [ ] Ultimate Designated Person                                       |
| Products   |
| [ ] Non-Trading  |
| [ ] Securities   |
| [ ] Options  |
| [ ] Futures Contracts and Futures Contract Options                   |
| [ ] Mutual Funds only  |
| Customer type  |
| [ ] Retail   |
| [ ] Institutional  |
| [ ] Not Applicable   |
| Portfolio management   |
| [ ] Portfolio Management   |
| Categories under local commodity futures and derivatives legislation |
| <u>Ontario</u>   |
| Firm categories  |
| [ ] Commodity Trading Adviser  |
| [ ] Commodity Trading Counsel  |
| [ ] Commodity Trading Manager  |
| [ ] Futures Commission Merchant                                      |

| Individual categories and permitted activities    |
|---|
| [ ] Advising Representative                       |
| [ ] Salesperson                                   |
| [ ] Branch Manager                                |
| [ ] Officer – Specify title:                      |
| [ ] Director                                      |
| [ ] Partner                                       |
| [ ] Shareholder                                   |
| [ ]IIROC approval only                            |
| <u>Manitoba</u>                                   |
| Firm categories                                   |
| [ ] Dealer (Merchant)                             |
| [ ] Dealer (Futures Commission Merchant)          |
| [ ] Dealer (Floor Broker)                         |
| [ ] Adviser                                       |
| [ ] Local   |
| Individual categories and permitted activities    |
| [ ] Floor Trader                                  |
| [ ] Salesperson                                   |
| [ ] Branch Manager                                |
| [ ] Adviser                                       |
| [ ] Officer – Specify title                       |
| [ ] Director                                      |
| [ ] Partner                                       |
| [ ] Futures Contracts Portfolio Manager           |
| [ ] Associate Futures Contracts Portfolio Manager |
| [ ] IIROC approval only                           |
| [ ] Local   |
| Ouébec - activities relating to derivatives       |

### Québec – activities relating to derivatives

For information purposes, indicate whether you will carry on activities as a

### representative of:

- [ ] An Investment Dealer Acting as a Derivatives dealer
- [ ] A Portfolio Manager Acting as a Derivatives portfolio manager

## SCHEDULE C Address and agent for service (Item 4)

### Item 4.1 Address for service

You must have one address for service in each province or territory in which you are now, or are seeking to become, a registered individual or permitted individual. A post office box is not an acceptable address for service.

| Address for service:  |
|---|
|   |
| (number, street, city, province or territory, postal code)  |
| Telephone number: () Fax number: ()   |
| E-mail address:   |
| Item 4.2 Agent for service  |
| If you have appointed an agent for service, provide the following information for the agent. The address for service provided above must be the address of the agent named below. |
| Name of agent for service:  |
| (if applicable)   |
| Contact person:   |
| Last name, First name   |

### **SCHEDULE D**

### Current employment, other business activities, officer positions held and directorships (Item 7)

Complete a separate Schedule E for each of your current business and employment activities with your sponsoring firm and with all other organizations. This includes any business related officer or director positions held, or any other equivalent positions held, whether you receive compensation or not.

| 1. Start date   |  |  |  |  |  |
|---|--|--|--|--|--|
| (YYYY/MM/DD)  |  |  |  |  |  |
| 2. Firm information   |  |  |  |  |  |
| ☐ Check here if this activity is employment with your sponsoring firm.  |  |  |  |  |  |
| If the activity is with your sponsoring firm, you are not required to indicate the firm name and address information below:   |  |  |  |  |  |
| Name of business or employer:   |  |  |  |  |  |
| Address of business or employer: (number, street, city, province, territory or state, country)  |  |  |  |  |  |
| Name and title of your immediate supervisor:  |  |  |  |  |  |
| 3. Description of duties  |  |  |  |  |  |
| Describe all employment and business activities related to this employer. Include the nature of the business and your duties, title or relationship with the business. If you are seeking registration that requires specific experience, include details with this firm such as level of responsibility, value of accounts under direct supervision, number of years of experience, and percentage of time spent on each activity. |  |  |  |  |  |
|   |  |  |  |  |  |
| 4. Number of work hours per week  |  |  |  |  |  |
| How many hours per week do you devote to this business or employment?   |  |  |  |  |  |

If this activity is employment with your sponsoring firm and you work less than 30 hours per week, explain why.

| 5. Conflict of Interest  |
|--|
| If you have more than one employer or are engaged in business related activities:  |
| A. Disclose any potential for confusion by clients and any potential for conflicts of interest arising from your multiple employment or business related activities or proposed business related activities. |
|  |
| B. Indicate whether or not any of your employers or organizations where you engage in business related activities are listed on an exchange.   |
| C. Confirm whether the firm has procedures for minimizing potential conflicts of interest and if so, confirm that you are aware of these procedures.   |
|  |
| D. If you do not perceive any conflicts of interest arising from this employment, explain why.   |
|  |

# SCHEDULE E Ownership of securities and derivatives firms (Item 8)

| Firm n | ame:   |                   |            |          |                              |  |  |
|--------|--|-------------------|------------|----------|------------------------------|--|--|
| What   | is your relationshi  | p to the firm?    | Partner    |          | Major shareholder            |  |  |
| What   | is the period of th  | nis relationship? |            |          |                              |  |  |
|        | From:  | То:               | (if a      | applicab | ole)                         |  |  |
|        | (YYYY/MM)  | (YYYY/MM)         |            |          |                              |  |  |
| Provid | de the following ir  | nformation:       |            |          |                              |  |  |
| a)     | State the number, value, class and percentage of securities, or the amount of partnership interest you own or propose to acquire when you are reinstated or approved as a result of the review of this form. If acquiring shares when you are so approved or registered, state the source (for example, treasury shares, or it upon transfer, state name of transferor). |                   |            |          |                              |  |  |
| b)     | State the market value (approximate, if necessary) of any subordinated debentures or bonds of the firm to be held by you or any other subordinated loan to be made by you to the firm:   |                   |            |          |                              |  |  |
| c)     | If another person or firm has provided you with funds to invest in the firm, provided the name of the person or firm and state the relationship between you and the person or firm:  |                   |            |          |                              |  |  |
| d)     | indirectly by any  Yes No  If "Yes", provid  | y person or firm? | the persor |          | ested) guaranteed directly o |  |  |
|        |  |                   |            |          |                              |  |  |

| e) | Have you directly or indirectly given up any rights relating to these securities this partnership interest, or do you, when you are registered or approved result of the review of this form, intend to give up any of these rights (includin hypothecation, pledging or depositing as collateral the securities or partner interest with any firm or person)? |                                |                               |  |  |  |
|----|--|--------------------------------|-------------------------------|--|--|--|
|    | Yes No   |                                |                               |  |  |  |
|    | If "Yes", provide the name of the person or firm, state the relationship between you and that person or firm and describe the rights that have been or will be given up:   |                                |                               |  |  |  |
| f) | Is a person other than you the beneficial owner of the shares, bonds, debentures, partnership units or notes held by you?  |                                |                               |  |  |  |
|    | Yes No   |                                |                               |  |  |  |
|    | If "Yes", complete (g), (h) and (i).   |                                |                               |  |  |  |
| g) | Name of beneficial owner:  |                                |                               |  |  |  |
|    | Last name First name   | Second name<br>(if applicable) | Third name<br>(if applicable) |  |  |  |
| h) | Residential address:   |                                |                               |  |  |  |
|    |  |                                |                               |  |  |  |
|    | (number, street, city, province, territory or state, country, postal code)   |                                |                               |  |  |  |
| i) | Occupation:  |                                |                               |  |  |  |

### SCHEDULE F Contact information for Notice of collection and use of personal information

### Alberta

Alberta Securities Commission, Suite 600, 250-5th St. SW Calgary, AB T2P 0R4

Attention: Information Officer Telephone: (403) 355-4151

#### **British Columbia**

British Columbia Securities Commission P.O. Box 10142, Pacific Centre 701 West Georgia Street Vancouver, BC V7Y 1L2 Attention: Freedom of Information

Officer

Telephone: (604) 899-6500 or (800) 373-

6393 (in BC)

### Manitoba

The Manitoba Securities Commission 500 - 400 St. Mary Avenue Winnipeg, MB R3C 4K5 Attention: Director of Registrations Telephone (204) 945-2548 Fax (204) 945-0330

### **New Brunswick**

New Brunswick Securities Commission Suite 300, 85 Charlotte Street Saint John, NB E2L 2J2

Attention: Director, Regulatory Affairs

Telephone: (506) 658-3060

### **Newfoundland and Labrador**

Securities NL

Financial Services Regulation Division Department of Government Services P.O. Box 8700, 2nd Floor, West Block Confederation Building St. John's, NL A1B 4J6

Attention: Manager of Registrations

Tel: (709) 729-5661

#### Nunavut

Legal Registries Division Department of Justice Government of Nunavut P.O. Box 1000 Station 570 Igaluit, NU X0A 0H0

Attention: Deputy Registrar of Securities

Telephone: (867) 975-6590

#### Ontario

**Ontario Securities Commission** Suite 1903, Box 55 20 Queen Street West Toronto, ON M5H 3S8

Attention: Compliance and Registrant

Regulation

Telephone: (416) 593-8314

e-mail: registration@osc.gov.on.ca

### Prince Edward Island

Securities Registry Office of the Attorney General B Consumer, Corporate and Insurance Services Division P.O. Box 2000 Charlottetown, PE C1A 7N8 Attention: Deputy Registrar of Securities

Telephone: (902) 368-6288

### Ouébec

Autorité des marchés financiers 800, square Victoria, 22e étage C.P. 246, tour de la Bourse Montréal (Québec) H4Z 1G3 Attention: Responsable de l'accès à

l'information

Telephone: (514) 395-0337 or (877) 525-0337

(in Québec)

### Nova Scotia

Nova Scotia Securities Commission Suite 400, 5251 Duke Street Halifax, NS B3J 1P3

Attention: Deputy Director, Capital

Markets

Telephone: (902) 424-7768

### **Northwest Territories**

Government of the Northwest Territories P.O. Box 1320

Yellowknife, NWT X1A 2L9

Attention: Deputy Superintendent of

Securities

Telephone: (867) 920-8984

### Saskatchewan

Saskatchewan Financial Services Commission Suite 601, 1919 Saskatchewan Drive Regina, SK S4P 4H2

Attention: Director

Telephone: (306) 787-5842

#### Yukon

Office of the Yukon Superintendent of

Securities

Government of Yukon

**Department of Community Services** 

307 Black Street, 1st Floor P.O. Box 2703 (C-6)

Whitehorse, YT Y1A 2C6

Attention: Superintendent of Securities

Telephone: (867) 667-5466

Fax: (867) 393-6521

http://www.community.gov.yk.ca/corp/secu

rities\_about.html

### Self-regulatory organization

Investment Industry Regulatory Organization

of Canada

121 King Street West, Suite 1600

Toronto, Ontario M5H 3T9 Attention: Privacy Officer Telephone: (416) 364-6133 E-mail: PrivacyOfficer@iiroc.ca