

In order to comply with certain regulatory requirements, including the *Proceeds of Crime (Money Laundering) and Terrorist Financing Regulations* and *Rule 1300 of the Investment Industry Regulatory Organization of Canada Rule Book* (the "Applicable Regulations"), National Bank Direct Brokerage ("NBDB") must check the identity of the Account Holder, of any person authorized to give instructions in or who benefits from an NBDB brokerage account. As such, if you are authorized to act in an account, please complete this form.

**1. IDENTIFICATION OF ACCOUNT HOLDER**

Surname of Account Holder	First name of Account Holder	Account Number

**2. GENERAL INFORMATION**

Indicate in which capacity you are acting:  
 Account holder **OR**  Person authorized to give instructions or with a financial interest in the account **OR**  Other Specified: \_\_\_\_\_  
(Please go to section 3)

Surname	First Name	Date of Birth (MM DD YYYY)	
Occupation	Type of business		
Current address	City	Province	Postal Code
Have you lived at this address for more than 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No, please provide previous permanent address:			
Previous address	City	Province	Postal Code

**3. VERIFICATION OF IDENTITY**

**3.1 In the presence**  
**If you are physically present at a branch of National Bank of Canada or at our offices**, NBDB must verify your identity by referring to the original document of one of the following pieces of identification.  
 Driver's licence issued in Canada **OR**  Provincial health insurance card (except for Prince Edward Island, Manitoba and Ontario) **OR**  Birth certificate issued in Canada (if under 21) **OR**  Canadian passport **OR**  Permanent Resident Card

Reference No.: \_\_\_\_\_ Place of issuance: \_\_\_\_\_ Expiry date: \_\_\_\_\_  
(MM DD YYYY)

I hereby acknowledge that I have seen the original document of the piece of identification checked above in the presence of the person to be identified.  
 First name and Surname of the Employee: \_\_\_\_\_ Branch: \_\_\_\_\_  
 Signature of the Employee: **X** \_\_\_\_\_ Date: \_\_\_\_\_  
(MM DD YYYY)

**3.2 In the absence**  
**If you are not physically present at a branch of National Bank of Canada or at our offices**, NBDB must identify you by using a combination of the following methods: 1) by confirming that you hold a deposit account with an acceptable financial institution **OR** by confirming that a cheque drawn on a deposit account with an acceptable financial institution has cleared **AND** 2) by referring to your credit file **OR** by referring to an independent and reliable identification product that is based on your personal and Canadian credit history information<sup>1</sup>.

<sup>1</sup> Please note that if you are a National Bank of Canada client, unless you notify us otherwise and if some conditions are fulfilled, referring to your credit file or to an independent and reliable identification product might not be necessary in order to verify your identity, NBDB will automatically proceed with identifying you by validating your identity with National Bank of Canada.

**Please choose one of the following options:**

**A-  Confirmation of a bank reference: Information on the client's principal financial institution**

Name of Financial Institution \_\_\_\_\_  
 Address of Financial Institution \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_  
 Telephone No. \_\_\_\_\_ Transit \_\_\_\_\_ Institution No. \_\_\_\_\_ Account No. \_\_\_\_\_  
(usually 5 digits) (usually 7 digits \*Refer to the bottom of cheque)

**B-  Cleared cheque (NBDB account holder only)**

Please attach a cheque for at least \$1 made out to National Bank Direct Brokerage Inc. The cheque will be deposited to your brokerage account and will be used to verify your identity.

**4. CONSENT TO THE COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION**

For the purpose of applying the provisions of the Applicable Regulations, I, the undersigned (account holder or person authorized to give instructions or who benefits from a brokerage account), hereby authorize my financial institution and NBDB to exchange certain personal information about me, solely to confirm my identity as stipulated in the Applicable Regulations and for no other purpose. I therefore authorize both parties to exchange the personal information provided on this form.

Date (MM DD YYYY): \_\_\_\_\_ Signature: **X** \_\_\_\_\_

**RESERVED FOR NBDB**

<p><input type="checkbox"/> SSC verification</p> <p>Methods used to verify <b>identity in absence</b></p> <p><input type="checkbox"/> NBC Bank reference</p> <p><b>or</b></p> <p><input type="checkbox"/> Bank reference from another financial institution        Person contacted at the other financial institution: _____</p> <p>Identity confirmed: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>or</b></p> <p><input type="checkbox"/> Cleared cheque        Name of Financial Institution: _____        Account No.: _____</p> <p><b>AND</b></p> <p><input type="checkbox"/> Credit Report <b>or</b> <input type="checkbox"/> Identification Report</p>	<p>Methods used to verify <b>identity in presence</b></p> <p><input type="checkbox"/> Verification of an identity document</p> <p><b>or</b></p> <p><input type="checkbox"/> Verification of an identity document at CIS (CLTIDD screen)</p> <hr/> <p><b>Cross reference of information</b></p> <p>Identity confirmed: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Verified by: _____  <small>Name of the employee</small></p> <p>_____  <small>Initials</small></p> <p>_____  <small>Date (MM DD YYYY)</small></p>
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