

F17A-2

High Interest
TFSA
Account
Application

INVESTMENT
FUNDS



F17A-2(18-08) PDF

Tax-Free Savings Account Application

(High Interest)



IMPORTANT

Please include:

- Copy of cheque for the deposit
- Void cheque for electronic transfers (if applicable)



HIGH INTEREST TAX-FREE SAVINGS ACCOUNT APPLICATION

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AUTOMATIC NP

Reserved for use by Trust

Confirmation Number grid

Confirmation Number

1- TYPE OF REGISTRATION FOR THE HIGH INTEREST TAX-FREE SAVINGS ACCOUNT (HEREAFTER THE "ACCOUNT") ISSUED BY INDUSTRIAL ALLIANCE TRUST INC. (HEREAFTER THE "ISSUER")

Tax-Free Savings Account (TFSA)

2- ISSUER'S AGENT

Industrial Alliance Insurance and Financial Services Inc. (hereafter the "Agent") acts as the Issuer's Agent to administer the account.

3- INFORMATION ABOUT THE ACCOUNT HOLDER (HEREAFTER THE "HOLDER")

(The Holder must be at least 18 years of age on the signature date of the Account application.)

First name Last name Initials

Address No. Street Apt.

City Province Postal code

Date of birth Social insurance no. (SIN) Gender: M F Language: E F

Telephone: Home Office Extension

Account holder's employment: Email address:

4- INTEREST RATE

The interest rate applicable to the amounts deposited in the Account is an annual rate. It can change at any time without notice. Interest is calculated according to the daily balance and is credited to the Account monthly.

5- STATEMENT/SIGNATURE (The Holder must read and consent to this section and sign it.)

I, the Holder:

- Hereby confirm that I have requested that this Account application ("Application") and related contractual terms and conditions be drafted in the English language only;
• Agree to the collection, use and disclosure of my personal information by the Issuer in the ways and for the purposes identified in the "File and Personal Information" subsection of the Account Agreement - High Interest Tax-Free Savings Account ("Account Agreement").
• Declare that the information provided in writing or electronic format related to this Application is complete and accurate and constitutes the basis for the Issuer to open the Account.
• Agree to advise the Issuer of any change to the information provided in this Application.
• Give the Issuer the right to correct any mistake or omission concerning this Application through notice of change.
• Acknowledge that I have read the contractual provisions provided in this Application as well as those provided in the Account Agreement; acknowledge that I have received a copy and understand that these provisions form an integral part of the agreement concluded between the Issuer and myself and that I agree to comply with them.
• Acknowledge that I have read the "Fee Schedule for iA Trust Products" document, in which the fees that apply to the Account are determined.
• Request that the Issuer or the Agent advise me of any offer or possibility, including any credit possibility that may be of interest to me and for which I am eligible.
• Understand that following reception of the welcome letter confirming my account number, I must register for the online My Client Space service available on the Agent's website at www.ia.ca to obtain information about my account and to carry out transactions.
• Request that the Issuer file an election to register the Account as a Tax-Free Savings Account (TFSA) under the Income Tax Act (Canada) and any applicable provincial legislation.

X Signature of Account Holder X Signature of witness

Signed at on this day of 20

6- INFORMATION ABOUT THE AGENT AND NOTICE OF DISCLOSURE (This section must not be completed when the Holder completes the application without the help of an agent.)

Name of agent Agent code SU

Name of district or agency Agency code

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

- that I am a duly authorized licensed agent
• the client identity and his/her date of birth, and I witness all signatures
• I have provided a disclosure statement to the Applicant which discloses:
- the company or companies I represent and my relationship with them
- that I receive compensation (such as commissions) for the sale of life insurance and savings products and may receive other compensation such as bonuses, invitations to conferences or other incentives, and
- any conflicts of interest that I may have with respect to this transaction

X Agent Date (DD-MM-YYYY)

7- ISSUER'S SIGNATURE

Authorized signatures of Industrial Alliance Trust Inc.

Normand Gervais President Frédéric Villeneuve General Manager





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High Interest TFSA Account Application

iA Trust Inc. is a subsidiary of iA Financial Group offering the Group's companies and distribution networks trust products and services that complement their operations.

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Send this duly completed application and required documents to:

Industrial Alliance Trust Inc.
IRS2525
1080 Grande Allee West
PO Box 1907, Station Terminus
Quebec City, QC G1K 7M3
Telephone: 418-780-5928
Fax: 418-684-5161
Email: savings@iatrust.ca

INVESTED IN YOU.

iA Trust is a trademark and business name under which **Industrial Alliance Trust Inc.** operates.

iatrust.ca



Protecting your deposits

Canada Deposit Insurance Corporation (CDIC) is a federal Crown corporation that protects your deposits for up to \$100,000 per insured category at financial institutions that are CDIC members. Coverage is free and automatic — you don't have to sign up.

What's covered?

- **Savings and chequing accounts**
- **Guaranteed Investment Certificates (GICs) and other term deposits** with original terms to maturity of five years or less

What's not covered?

- **Mutual funds, stocks, and bonds**
- **Foreign currency** (eg. \$ U.S.)

Add up your coverage!

We protect deposits in CDIC members to help with your savings goals. If you deposit money in **savings accounts, chequing accounts or GICs** and other **term deposits** (of five years or less), it is protected for up to \$100,000 in each of these categories.



You	+	\$100,000 <small>(in your name alone)</small>
You and another	+	\$100,000 <small>(joint total)</small>
Your savings in trust	+	\$100,000 <small>(for each beneficiary, includes RESPs)</small>
Your tax-free savings	+	\$100,000 <small>(TFSA)</small>
Your retirement savings	+	\$100,000 <small>(RRSP)</small>
Your retirement income	+	\$100,000 <small>(RRIF)</small>
Your property taxes	+	\$100,000 <small>(for mortgaged properties)</small>

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Your total protection in each CDIC member

What happens if a CDIC member fails?

Your money belongs in your hands. CDIC works hard to protect your savings and your access to financial services. If your institution closes, we will reimburse your insured funds (including interest) within days. It's automatic — we will contact you.

What you can do

- Keep your contact information at your financial institution up-to-date so CDIC can send payment if necessary.
- Know what is covered and what is not.

Want to know more?

CDIC is a federal Crown corporation, and is fully funded by CDIC members.

Visit our website
cdic.ca

Call us
1-800-461-2342

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