

In accordance with the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act* (hereinafter "PCMLTFA"), National Bank Direct Brokerage, a division of National Bank Financial Inc. (hereinafter "NBDB") is required to verify the identity of all account holders, all persons empowered to give instructions and any person who has a financial interest in the account. This includes the requirements of Regulation 1300.1 of the Investment Industry Regulatory Organization of Canada (hereinafter "IIROC") to ascertain the identity of any individual who is the beneficial owner of more than 10% of the corporation or similar entity. If you are one of these person, 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 (Please go to section 3) **OR**
 Person authorized to give instructions or with a financial interest in the account **OR**
 Other Specified : \_\_\_\_\_

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?  Yes  No, please provide previous permanent address:

Previous address \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

**3. VERIFICATION OF IDENTITY**
**3.1 Identification document method – In 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 an original and valid photo identification document from the following:

Driver's licence issued in Canada **OR**
 Health Insurance Card issued by the Province of Quebec **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: \_\_\_\_\_ Transit: \_\_\_\_\_

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

**3.2 Dual process method – In 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 check of at least \$25.00 made out to National Bank Direct Brokerage. The check 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**

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