

**1. IDENTIFICATION OF ACCOUNT HOLDER**

Last name of account holder \_\_\_\_\_ First name of account holder \_\_\_\_\_ Date of birth (MM DD YYYY) \_\_\_\_\_

Last name of co-holder (if applicable) \_\_\_\_\_ First name of co-holder (if applicable) \_\_\_\_\_ Date of birth (MM DD YYYY) \_\_\_\_\_

I authorize the following bank account to be linked to my brokerage account with National Bank Direct Brokerage, a division of National Bank Financial Inc. (hereinafter "NBDB"), so that I can carry out electronic fund transfers at will. Consequently, I authorize my financial institution and NBDB to exchange certain personal information about me for the sole purpose of confirming the accuracy of my bank account information.

Your financial institution may charge fees for the confirmation of your banking account information. For more details, please verify with your institution. Please note that NBDB does not reimburse those fees.

Date (MM DD YYYY) \_\_\_\_\_ Signature of account holder \_\_\_\_\_

Date (MM DD YYYY) \_\_\_\_\_ Signature of co-holder (if applicable) \_\_\_\_\_

**2. VERIFICATION OF BANK INFORMATION**

**Note:** The fields below must be completed in order for NBDB to process your request. The account(s) listed below must belong to the account holder mentioned in Section 1 (Identification of account holder). If you hold several bank accounts coming from different institutions, please note that one form must be filled per financial institution.

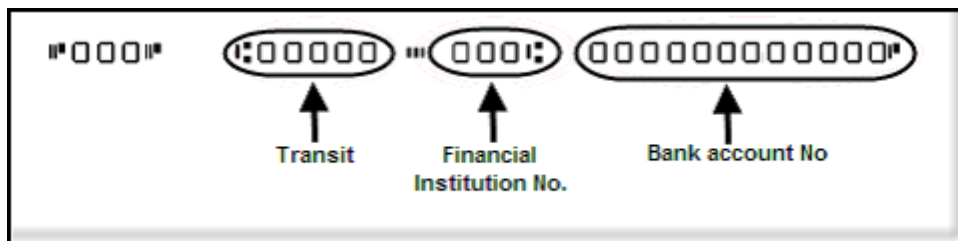
 Name of financial institution<sup>1</sup>: \_\_\_\_\_

<sup>1</sup> This present form cannot be used for a banking account held at ING Bank/Tangerine or CIBC Bank. We invite you to communicate with one of our customer service representatives for more information.

 Address: \_\_\_\_\_  
 (No. and street, city, province, postal code)

Telephone No.: \_\_\_\_\_ Fax No.\*: \_\_\_\_\_

\* Used for the verification of your banking information


**Transit**
**Financial Institution No.**
**Bank account No.**
**Type of account**
**Currency (CAD\$ or USD\$)**

1. \_\_\_\_\_

**TO BE USED SOLELY BY NBDB**

Contact person of financial institution: \_\_\_\_\_

 Verification confirmed:  Yes  No

 Verification carried out by: \_\_\_\_\_  
 Last and first name of employee \_\_\_\_\_ Initials \_\_\_\_\_ Date (MM DD YYYY) \_\_\_\_\_