

Quick Reference

12724 Form

Designation and change of beneficiary (Canada except Quebec)

First and last name of annuitant/holder		_	
IDENTIFICATION OF ACCOUNT			
	account identified below. If you wish to make a desi	anation for another assembly you must some	nlata a canarata form
The designation only applies to the SOLE	account identified below. If you wish to make a desi	gnation for another account, you must comp	piete a separate form.
Plan account No.:	(enter one account No. only)	Apply to my USD\$ account as well	
Type of plan (TFSA, RRSP, RRIF, LIF, R	LIF, LRIF, PRIF, LIRA, LRSP, etc.):		
DESIGNATION OF A SURVIVING	NNUITANT/HOLDER (ALSO KNOWN AS SU	CCESSOR ANNUITANT/HOLDER)	
Warning: The designation of a survivi	ng annuitant/holder will not have the exact same	effects as a beneficiary designation.	
	RIF and Restricted LIF): In accordance with the te he payments from this fund continue to be paid to 46.3 of the <i>Income Tax Act</i> (Canada).		
under the meaning of Section 146.2 of th	rerning the tax-free savings account hereinabove, I e Income Tax Act (Canada) and I transfer to him or I n made, or any similar order given regarding the acc	ner all the rights that I hold in this account, in	
First and last name of the spouse or common-law par	iner	_	
DESIGNATION OF BENEFICIARY			
In accordance with the terms governing	the Plan, I designate the following persons as benef	merics of all proceeds payable under the f	Plan, on the condition t
they are still alive on the date of my deat		icialies of all proceeds payable under the r	
they are still alive on the date of my deat Primary Designation			% of
they are still alive on the date of my deat			% of distribution
they are still alive on the date of my deat Primary Designation First and last name			% of distribution
they are still alive on the date of my deat Primary Designation First and last name	Relationship to annuitan	e annuitant's/holder's death)	distribut
they are still alive on the date of my deat Primary Designation First and last name Contingent Designation (only applies if First and last name	Relationship to annuitan	e annuitant's/holder's death)	distribution with the state of
they are still alive on the date of my deat Primary Designation First and last name Contingent Designation (only applies if First and last name	Relationship to annuitan there are no surviving beneficiaries on the date of the Relationship to annuitan annuitan the designated as both the primary and continuous designated as both the primary desig	e annuitant's/holder's death)	distribution with the state of
they are still alive on the date of my deat Primary Designation First and last name Contingent Designation (only applies i First and last name IMPORTANT: The same beneficiary ca SIGNATURE OF ANNUITANT/HOL I have read, understood and I accept the Plan, including any related designation b	there are no surviving beneficiaries on the date of the Relationship to annuitant Relationship to annuitant not be designated as both the primary and continuous terms hereof and I revoke any surviving annuitant/h	e annuitant's/holder's death) t ingent beneficiary.	distribution % of distribution viously with respect to
they are still alive on the date of my deat Primary Designation First and last name Contingent Designation (only applies if First and last name IMPORTANT: The same beneficiary ca SIGNATURE OF ANNUITANT/HOL I have read, understood and I accept the Plan, including any related designation b I acknowledge that the designation of	Relationship to annultan there are no surviving beneficiaries on the date of the Relationship to annultan Relationship to annultan some bedsignated as both the primary and continuous terms hereof and I revoke any surviving annultant/hy will for such purpose.	e annuitant's/holder's death) t ingent beneficiary. older and beneficiary designation made pre	distribution % of distribution wiously with respect to s. I acknowledge that
they are still alive on the date of my deat Primary Designation First and last name Contingent Designation (only applies if First and last name IMPORTANT: The same beneficiary ca SIGNATURE OF ANNUITANT/HOL I have read, understood and I accept the Plan, including any related designation of I acknowledge that the designation of Institution has not made any representat respect. I acknowledge that I am solely respons obtaining the relevant confirmations and	there are no surviving beneficiaries on the date of the Relationship to annuitan Relationship to annuitan Relationship to annuitan Relationship to annuitan DER terms hereof and I revoke any surviving annuitant/hy will for such purpose. a surviving annuitant/holder and/or beneficiary hereons to me of a legal, fiscal or other nature related to ble for checking that this designation is valid under making any appropriate changes in a timely manner.	e annuitant's/holder's death) ingent beneficiary. blder and beneficiary designation made presinabove has legal and tax consequences such designation and I release the Institution the applicable legislation in my province	distributi % of distributi viously with respect to 6. I acknowledge that on from any liability in
they are still alive on the date of my deat Primary Designation First and last name Contingent Designation (only applies if First and last name IMPORTANT: The same beneficiary ca SIGNATURE OF ANNUITANT/HOL I have read, understood and I accept the Plan, including any related designation of I acknowledge that the designation of Institution has not made any representat respect. I acknowledge that I am solely respons obtaining the relevant confirmations and	there are no surviving beneficiaries on the date of the Relationship to annuitant Relationship to annuitant Relationship to annuitant Relationship to annuitant DER terms hereof and I revoke any surviving annuitant/he, will for such purpose. a surviving annuitant/he ons to me of a legal, fiscal or other nature related to ble for checking that this designation is valid under	e annuitant's/holder's death) ingent beneficiary. blder and beneficiary designation made presinabove has legal and tax consequences such designation and I release the Institution the applicable legislation in my province	distribution % of distribution viously with respect to so a cancel acknowledge that on from any liability in the second



Annuitant Identification

Enter the name of the account holder.



Account Identification

- Only one account can be identified per form.
- > Indicate the **7-character** account number.
- > Check the "USD\$" box to apply a similar request to a USD\$ account of the same plan.
- > Only one of the plans mentioned in the question can be chosen.
- Note: A beneficiary cannot be designated for a nonregistered account, RESP and FHSA.



Designation of a Surviving Annuitant

> Only for an RRIF, LIF, PRIF, and TFSA account.



Designation of Beneficiary

- > Complete the field for each beneficiary.
- > The sum for each category of designation must be 100%.



Signature & Sending Form

- > A **signature** and **date** are mandatory.
- > Electronic signature: Must be sent via the secure Message Centre of the online brokerage platform.
- Handwritten signature: Send by mail to the address indicated at the bottom of the form.

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