

Application for an Ideal Segregated Funds Contract

Tax-free Savings Account

The Standard Life Assurance Company of Canada

Operations, Customer Experience
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How to Complete the Application Form *

For more details see *Administrative Guidelines on Advisor Source* at www.standardlife.ca

Use this form to apply for a new **Ideal Segregated Funds Contract – Tax-free Savings Account** or to make an **additional premium payment**.

Complete all sections of the application as required. Unclear and/or incomplete information will delay the start of the selected investment and a premium under a new contract or additional premium to an existing contract will be allocated to the no-load Ideal Money Market Fund II. Upon receipt of the required information, a switch will be processed to the selected Fund(s) using the switch date as the effective date.

Top of Form

- New contract - select *New plan* and complete each section as required.
- Additional premium - select *Additional premiums* and enter the existing contract number. Complete sections 5 to 10 as required, and sections 3 and 4 for a change in Successor Planholder and Beneficiary.
- Back-End Load and No-Load premium allocation options can be accommodated under the same contract. The No-Load with Reset option and the Platinum No-Load option each require separate contracts.

1 Planholder Information – Provide complete information on the Planholder. The Planholder must be an individual who is a Canadian resident aged 18 years or over. For *Nature of principal business or occupation*, enter the type of business or occupation of the Planholder, e.g., “public relations firm”, “lawyer”, etc. If retired, enter the former occupation, e.g., “retired teacher”, etc.

2 Identity Verification of Planholder – Complete this section for a new contract. The document used to verify the Planholder’s identity cannot be expired. A provincial health insurance card, Record of Landing or Permanent Resident Card may also be used to verify the identity (**Manitoba, New Brunswick, Ontario and P.E.I.** – in these provinces it is prohibited to ask to see a client’s health card. **Quebec** – you cannot ask to see a client’s health card, but you may accept it if it is offered by the client).

4 Beneficiary Information – If no Beneficiary is named and a Successor Planholder is not named in section 3, the Beneficiary will default to the Planholder’s estate.

5 Premium Payment Information and Allocation Instructions – See charts below for Fund names and numbers, and premium minimums.

Ideal Segregated Fund Names and Numbers				
Fund Name	Fund Numbers			
	Back-End Load	No-Load	No-Load with Reset <i>Not available through electronic processing</i>	Platinum No-Load
Fixed Income Funds				
Ideal Money Market II	130	330	530	430
Ideal Canadian Bond	101	301	501	401
Ideal Corporate High Yield Bond	108	308	508	408
Ideal International Bond	109	309	509	409
Monthly Income Funds				
Ideal Income Balanced	105	305	505	405
Ideal Monthly Income	113	313	513	413
Dividend Funds				
Ideal Canadian Dividend Growth	104	304	504	404
Ideal Dividend Income	120	N/A	520	420
Ideal U.S. Dividend Growth	121	N/A	521	421
Ideal Global Dividend Growth	119	319	519	419
Canadian Equity Funds				
Ideal Balanced	100	300	500	400
Ideal Canadian Equity	102	302	502	402
Ideal Canadian Small Cap	110	310	510	410
Global Equity Funds				
Ideal U.S. Equity	106	306	506	406
Ideal International Equity	107	307	507	407
Ideal Global Equity	114	314	514	414
Focus Funds				
Ideal Canadian Equity Focus	122	N/A	522	422
Portfolios				
Ideal Conservative	115	315	515	415
Ideal Moderate	116	316	516	416
Ideal Growth	117	317	517	417
Ideal Aggressive	118	318	518	418

Premium Minimums	
The Canada Revenue Agency maximum premium allowed for the 2011 calendar year is \$5,000. For more information visit the CRA web site at www.cra.gc.ca and see TFSA contribution room.	
All Options Except Platinum No-Load	
Initial Premium (New Contract)	\$1,000 lump sum (\$250 per Fund) or \$50 PAD per Fund
Additional Premiums	\$250 per Fund or \$50 PAD per Fund
Platinum No-Load	
Initial Premium (New Contract)	\$250,000 (\$5,000 per Fund)
Additional Premiums	\$5,000 per Fund or \$1,000 PAD

Source of Funds: Check the applicable box to indicate the source of funds. For a transfer from an existing Standard Life Contract, select *Internal Transfer* and enter the contract number the funds are being transferred from. Use *Transfer authorization for registered investments* form 6511 to transfer TFSA funds from another financial institution. This form is available from the general section of Forms on Advisor Source at www.standardlife.ca. Specimen Plan number is TFSA 02670024.

Select the Ideal Segregated Fund(s) and premium load option(s) by entering the Fund name and Fund number in the **Premium Allocation Option** column.

Under **Premium Payment** select **Amount** or **Percent** and enter the dollar amount or percentage of the premium to be allocated to the selected Fund(s). For a **pre-authorized debit (PAD)** plan, enter the dollar amount to be allocated to the selected Fund(s) and complete section 6.

To select **dollar cost averaging**, indicate the Funds between which the switch is to be made by entering the amounts in the From Fund and To Fund columns. Switches are not permitted between Funds with a Back-End Load option and No-Load option or vice versa. The minimum for the Platinum No-Load option is \$1,000 per fund. Minimums for all other options are \$250 per Fund. Complete section 6.

For a **systematic withdrawal plan (SWP)**, select **Amount** or **Percent**, enter the dollar amount or percentage to be withdrawn from the selected Fund(s) and complete section 6. For the Platinum No-Load option, withdrawals of \$5,000 or more can be made provided that the contract has a minimum balance of \$250,000. For all other options, withdrawals of \$100 or more can be made provided that the contract has a minimum balance of \$5,000.

6 PAD Plan, Dollar Cost Averaging or SWP – Select the frequency and complete the applicable area. For a PAD plan or SWP, submit a personalized void cheque or provide a stamped confirmation from the bank with the following details: bank name, transit number, bank code and Planholder’s/Payor’s bank account number.

8 Advisor Information – Enter the information requested. For **manual** processing, enter the advisor’s 6-digit code (e.g. 099999) and the sales office (distributor) code (5 letters) provided by Standard Life. For **electronic** processing, enter the advisor and distributor codes. The servicing advisor will be the person who signs the application form, unless indicated otherwise for split cases. To identify the servicing advisor, add the remarks “servicing advisor” beside the advisor’s name. The servicing advisor receives copies of client statements/notices and has access to the client’s records through ClientINFO.

9 Authorization and Signature – The Planholder must sign and date the application in this section.

10 Advisor Declaration and Signature – The advisor must sign and date in this section.

The 4th copy is given to the client together with the Ideal Segregated Funds Information Folder. Send the original to Standard Life.

* These instructions are valid as of the date of printing and are subject to change.

6 Pre-authorized Debit Plan (PAD), Dollar Cost Averaging or Systematic Withdrawal Plan (SWP)

Frequency: Weekly Every two weeks Monthly Every two months Quarterly Semi-annually Annually

PAD: First draw date (DD-MM-YYYY)

Regular draw date (DD-MM-YYYY)

Dollar Cost Averaging: Start date (DD-MM-YYYY)

End date (DD-MM-YYYY) (if applicable)

SWP: Payment date (DD-MM-YYYY)

Payment method: Direct deposit Mail* to Planholder's address

*Standard Life reserves the right to stop issuing cheques and offer direct deposit only.

7 Banking Information (Please provide a personalized void cheque OR valid stamped proof from the bank. Only required for PAD agreements and SWPs)

Name of financial institution

Transit number

Bank code

Account number

8 Advisor Information

Advisor name (please print)

Advisor code

Tel.

Fax number

E-mail address

Distributor (e.g. GA) name

Distributor code

% split (for split commissions)

9 Authorization and Signature*

- I declare that the statements and answers in this application are true and I agree that this application and declaration as well as the Ideal Segregated Funds Contract Provisions for Tax-free Savings Account shall be the basis of the Contract between Standard Life and me. I have received the complete application form.
- I acknowledge receipt of the Standard Life Ideal Segregated Funds Information Folder, including the Ideal Segregated Funds Fund Facts and Ideal Segregated Funds Contract Provisions for Tax-free Savings Account, and I understand that some benefits provided in respect of premiums allocated to an Ideal Segregated Fund are **not guaranteed** and will fluctuate with the market value of the assets of the Fund.
- I have asked Standard Life to file an election with the Minister of National Revenue to register the Contract as a Tax-free Savings Account under section 146.2 of the *Income Tax Act* (Canada) and any applicable provincial income tax legislation.
- In the event that I become a non-resident of Canada, I will advise Standard Life in writing.
- By providing direct deposit information, I authorize Standard Life to deposit scheduled payments due from this Contract into the bank account indicated on the personalized void cheque. Standard Life will have no further liability with respect to these payments.
- If I have indicated on the application that I want to pay regular premiums using a PAD plan, I authorize the bank or other financial institution I have named to honor my instructions.
- I authorize The Standard Life Assurance Company of Canada or any of its affiliated companies to disclose personal information to other financial institutions, my advisor, my authorized dealer and any other third parties, when necessary, for administrative or processing purposes.

Planholder

Date (DD-MM-YYYY)

Province of signature

*If this section is incomplete, the application will be rejected.

10 Advisor Declaration and Signature

By signing below, I am confirming that:

- I have completed this application form with the Planholder and hold a valid life insurance license in the jurisdiction where the application was signed.
- To the best of my knowledge, the information supplied within this application is accurate.
- I have disclosed the following information to the Planholder: the company or companies I represent; that I receive compensation (such as commissions or a salary) for the sale of life and health insurance company products; that I may receive additional compensation in the form of bonuses, conference programs or other incentives; and any conflict of interest I may have with respect to this transaction.

Advisor signature

Date (DD-MM-YYYY)

11 Notice to Planholder

The transaction represented by this application is between the Planholder and Standard Life. The person soliciting this application is an independent contractor and will receive compensation from Standard Life upon the completion of this transaction. As a result of this application, the person soliciting this application may be eligible for non-monetary benefits depending on the volume of business that she/he places with the company during a given time period. The Planholder is not obligated to transact any other business with Standard Life as a condition of this transaction.

Standard Life will establish a financial services file for insurance, annuity, credit and related services in which information concerning your application for insurance will be placed, as well as information concerning any insurance claim. Only advisors associated with this contract, employees or individuals responsible for underwriting, investigation, administration and claims, or any person whom you authorize, will have access to this file.

Your file will be kept in the Standard Life office. You are entitled to consult the personal information contained in your file and, if applicable, to have it rectified by sending a written request to the following address:

Ombudsman
The Standard Life Assurance Company of Canada
1245 Sherbrooke Street West
Montréal, Quebec H3G 1G3

**Retirement
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www.standardlife.ca

The Standard Life Assurance Company of Canada

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