

In this document, care has been taken to eliminate sexual stereotyping when making gender references.

Section 1: Type of Group plan (select only one box)

→ Choose one plan only:

☐ Retirement Savings Plan: **Beneva RSP**

☐ Retirement Income Fund: **Beneva RIF²**

☐ Locked-In Retirement Account: **Beneva LIRA^{1,3}**

☐ Locked-in Retirement Income Fund: **Beneva LRIF^{2,3}**

☐ Life Income Fund: **Beneva LIF^{2,3}**

Group No.

Group/Plan name

Name of employer or association

1. Beneva Lira includes the Locked-in Retirement Account (LIRA) and the Locked-in Retirement Savings Plan (LRSP).
2. For Beneva RIFs, LIFs and LRIF, the Pre-authorized Transaction Program form (FRA1407) must obligatorily be completed and included in appendix as an integral part of this application.
3. Indicate pension legislation applicable to the plan in accordance with the meaning under the applicable contract (Ontario, Quebec or Federal):

Section 2: Member Information

☐ Join proof of age (RIF, LIF and LRIF)

Employee No.

Last name

First name

Social Insurance Number¹

Address (No.)

Street

Apt.

Date of birth

City

Province

Postal code

Telephone (home)

Telephone (office)

Ext.

Email

Sex:

☐ Female

☐ Male

Language:

☐ French

☐ English

1. Used for taxation purposes only.

Section 3: Other Parties to the Contract (payer/spouse)

☐ Payer (spousal RSP or RIF)

☐ Spouse (RIF/LIF)

☐ Join proof of age

Instructions to complete Section 3:

– If the payer is the member's spouse: Check off (✓) “Payer”.

– If calculation of the minimum amount of the annuity, RIF, LIF or RLIF or LIF is based on the spouse's age: check off (✓) “Spouse” and join her/his proof of age.

Last name

First name

Social Insurance Number¹

Address (No.)

Street

Apt.

Date of birth

City

Province

Postal code

Telephone (home)

Telephone (office)

Ext.

Email

Sex:

☐ Female

☐ Male

Language:

☐ French

☐ English

1. Used for taxation purposes only.

Section 4: Beneficiary Designation

In the event of death, I hereby assign any death benefit payable under the terms of my contract to the beneficiary(ies) mentioned here below or, in the absence of a beneficiary designation, to my estate, subject to applicable legislation. **Should no choice be made, the beneficiary designation is revocable, except in Quebec, where the designation of a married or civil union spouse as beneficiary is automatically irrevocable, unless the “revocable” box has been checked.** The designation of a contingent or continuing beneficiary is always revocable.

In accordance with applicable legislation, a Member may make, alter or revoke a designation of beneficiary. Should the beneficiary designation be irrevocable, the consent of the beneficiary will be required for any future beneficiary designation modification and for any partial or total withdrawal of the sums accrued in the contract. Should a minor child be irrevocably designated, the irrevocable nature of this designation cannot be modified until the child reaches majority and thus becomes able to give his consent by signing the required form. If you want the death benefit to be paid out in the form of an annuity, please complete form FRA1744.

In the case of a LIRA or a LIF, if a spouse exists at the time of death, the spouse will be recognized as the legal beneficiary of this contract, in accordance with applicable legislation and rules, unless he or she waives those rights in writing.

Primary Beneficiaries Last name, first name	Relationship to the annuitant (Or in Quebec, relationship to the investor)			%	Revocability of primary beneficiary		Date of birth (If a minor)
	Spouse*	Unmarried Spouse	Other		Revocable	Irrevocable	
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Y Y Y Y M M D D
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Y Y Y Y M M D D
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Y Y Y Y M M D D

* Spouse or civil union partner → Civil unions are considered the same as marriage when contracted in compliance with prescribed rules before a competent officiant and registered with the provincial authorities.

Continuing Beneficiaries or Contingent Beneficiaries (optional)

Check only one beneficiary type and complete the appended table.

☐ Continuing Beneficiaries

Upon the death of a primary beneficiary, the associated continuing beneficiary replaces him or her.

A continuing beneficiary may replace one or several primary beneficiaries.

☐ Contingent Beneficiaries (Subrogated in Quebec)

A contingent beneficiary receives the death benefit if all the primary beneficiaries are deceased.

Last name, first name	Date of birth (If a minor)	% ^{1,2}	Complete only if you designate continuing beneficiaries
			Last name, first name of primary beneficiary ³
	Y Y Y Y M M D D		
	Y Y Y Y M M D D		
	Y Y Y Y M M D D		
	Y Y Y Y M M D D		

1. Continuing Beneficiary: The sum of the percentage of each continuing beneficiary named to replace a primary beneficiary must total 100%.
2. Contingent Beneficiary: The total percentage for all contingent beneficiary must total 100%.
3. If you designate one or more contingent beneficiaries and have entered the information in this section, it will not be considered.

Information about the Trustee (does not apply in Quebec)

Complete this section only if the beneficiary is a minor. A trustee must be appointed to receive payment on behalf of a designated beneficiary who is a minor until the beneficiary reaches the age of maturity. **In Quebec, payment will be made in the name of the minor beneficiary and sent to the beneficiary's parent(s) or legal guardian.**

Name of trustee

Relationship to trustee

Reserved for Beneva

Contract No.

Beneva – Client Services: 1 877 841-8822

Investment

Please provide a copy of the form to the member, a copy to the plan administrator and a copy to Beneva.
Scanned documents received by Beneva may be used by Beneva in lieu of the original document.

Section 5: Investment Allocation for Payroll Deductions

IF YOUR GROUP IS RESPONSIBLE FOR DETERMINING ALLOCATIONS, do not complete this section as information will not be considered.

Beneva FUNDS:

Fund No. (see list of Beneva Funds)	Abbr. name	Allocation (%)
Total		_____ %

Please enter the codes of all of the investment funds you want to allocate contributions to (see list of Beneva Funds). Indicate the percentage applicable to each segregated fund. The percentages per contribution category must add up to 100%.

In the absence of any investment instructions, the sums received will be invested in the Beneva Fiera Capital Money Market Fund or in the default instruction determined by your collective group, if applicable.

Lump-sum Contributions and Transfers from Another Plan

In the absence of investment instructions for lump-sum contributions and transfers, such contributions will be invested in accordance with the established investment allocation defined above.

For preauthorized payments, complete the Pre-authorized Purchase Program (PPP) form (FRA683).

Section 6: Additional Instructions

Section 7: Notice Regarding the Protection of Your Personal Information

Protecting your personal information is a priority for Beneva.¹ For this reason, we want to inform you that we collect, use and disclose your personal information only with your consent, unless otherwise permitted by law, and only for the time necessary to:

- identify you
- establish and update your profile, needs and objectives
- evaluate your applications and eligibility for our products and services
- provide you with advice related to your situation
- administer your contracts as well as your products or services (e.g.: pricing, underwriting, enrolment, claims processing, etc.)
- comply with legal and regulatory requirements (e.g.: preventing, detecting or deterring violations, cyber threats, fraud, etc.)
- obtain your feedback on our products and services
- provide you with personalized offers and advice about our products and services (refer to your **right to withdraw consent**) based on your preferences and in compliance with the rules governing electronic and telephone communications
- conduct studies and research, including the design and application of statistical models, some of which may allow for creating or inferring new information about you

How does Beneva collect your personal information?

We may collect your personal information over the telephone, in person, and through the use of our forms and our digital platforms.

Who does Beneva share your personal information with?

For the purposes described above, and only in connection with your products and services, we share your personal information with our affiliates and distribution networks and with third parties, some of which may be located outside of Quebec and Canada.

These third parties may include:

- other financial institutions, such as insurers and reinsurers
- other organizations or entities that have information about you, including insurance, fraud or claims information
- intermediaries
- credit assessment agencies
- government departments, agencies or regulatory authorities
- employers
- claims-related service providers, such as healthcare professionals and auto repair shops
- other agents and service providers (technology services, printing and mailing services, etc.)

Please note that in all cases, we ensure that they respect the protection of your personal information.

1. The term "Beneva" refers to Beneva Inc., its affiliates and their mutual insurance companies and distribution networks. Affiliates of Beneva Inc. designates La Capitale Financial Security Insurance Company, Beneva Investment Services Inc., Beneva Insurance Company Inc., L'Unique General Insurance Inc. and Unica Insurance Inc.

What are your rights regarding access and rectification?

You may access your personal information or request the correction of incomplete or inaccurate information. Send us a request to the following address:

Personal Information Protection Officer

Beneva
625 rue Jacques-Parizeau
Quebec QC G1R 2G5
ResponsablePRP@beneva.ca

For more information about our personal information protection practices, please refer to the complete version of our Personal Information Protection Statement at www.beneva.ca.

Your consent for the collection, use and disclosure of your personal information is necessary in order to provide the product or service requested or offered. You have the right to withdraw your consent, but Beneva will not be able to continue providing you with its products or services.

Beneva – Investment

Client Services

P.O. Box 10510, Station Sainte-Foy, Quebec QC G1V 0A3
Tel.: 1 877 841-8822
beneva.ca

Section 8: Authorization

Required for all plans.

I authorize the above-mentioned employer or association to act as “agent” for the plan in accordance with the meaning under the applicable contract and I authorize my employer to deduct from my salary, where applicable, the prescribed contributions to the plan. This authorization remains valid until written revocation on my part.

I acknowledge having read and understood the terms and conditions of the plan and I hereby apply for membership in the plan. Any information provided constitutes an affirmation of this on my part.

In the case of a Beneva RSP or Beneva LIRA, I request that Beneva Inc. (Beneva) issue, as applicable, a Retirement Savings Plan (RSP) or a Locked-In Retirement Account (LIRA), and to apply for registration so that either this plan or account, depending on the case, be registered as a Registered Retirement Savings Plan (RRSP) under section 146 of the Income Tax Act (Canada).

In the case of an Beneva RIF or an Beneva LIF, I request that Beneva Inc. issue, as applicable, a Retirement Income Fund (RIF) or a Life Income Fund (LIF) and apply for registration so the one or the other of these funds be registered as a Registered Retirement Income Fund (RRIF) under section 146.3 of the Income Tax Act (Canada).

I acknowledge having read and understood the information provided to me concerning investment funds, the relative degree of risk, as well as the particular characteristics and advantages of each fund. I assume full responsibility for my investment choices. I recognize that certain Beneva Funds have an inherently higher degree of risk any therefore may be subject to significant variations in returns over short-term periods. I understand that I must restrict my investments in these funds to a maximum of 5% of the total value of my portfolio.

I certify that my signature, if affixed electronically, has the same legal value as my handwritten signature. Any reproduction of this form whose integrity is ensured has the same legal value as the original.

I authorize Beneva Inc. to verify my identity, when required by law, using an independent and reliable identification product and/or any other means permissible under the law. I acknowledge that I have read the notice concerning the protection of personal information and I have kept a copy of this application duly signed.

X
Member’s signature (mandatory)
Date

X
Other signature (If applicable – See Section 3) (mandatory)

For LIFs, PRRIFs and LRIFs for the provinces of Nova Scotia, Ontario, Alberta, Saskatchewan, British Columbia, Manitoba and Newfoundland and Labrador ONLY

Spousal authorization for registration in locked-in plans
Do you have a spouse as defined under the pension legislation applicable to the plan?
If yes, please provide the following information:
For the provinces of Nova Scotia, Alberta, Saskatchewan, British Columbia and Manitoba, it is not necessary for the spouse to sign this section. However, please attach the appropriate form indicating the spousal authorization or surrender in accordance with the pension legislation applicable.
For the provinces of Ontario and Newfoundland and Labrador, the spouse as defined under the applicable pension legislation must sign below to indicate authorization for registration in the locked-in plan.
X
Spouse’s signature
Date

Issuer: Jean-François Chalifoux, Chief Executive Officer of Beneva Inc.

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