

Section 1: Group Identification

<div><div></div><div></div><div></div><div></div></div>	Group No.	Group Name
---	-----------	------------

Section 2: Member Identification

Last Name		First Name		<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	
Address (No.)		Street		Apt.	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>
Town/City		Province		Postal Code	
Telephone (home)		Gender : <input type="checkbox"/> Female <input type="checkbox"/> Male		Social Insurance Number	
		Language : <input type="checkbox"/> English <input type="checkbox"/> French		<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	
				<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	
				Date of Birth	

Section 3: Transfer and/or redemption☐ **Transfer: Join the duly completed T2151 form**

<input type="checkbox"/> RRSP	Amount: \$	<input type="checkbox"/> Locked-in	<input type="checkbox"/> Not locked-in
<input type="checkbox"/> RRSP (Excess amount)	Amount: \$		
<input type="checkbox"/> RPP	Amount: \$	<input type="checkbox"/> Locked-in	<input type="checkbox"/> Not locked-in
<input type="checkbox"/> LIF	Amount: \$		
<input type="checkbox"/> LIRA	Amount: \$		
<input type="checkbox"/> RRIF	Amount: \$		
Total amount: \$			

Cheque payable to (financial institution):

Located at the following address:

Is there an irrevocable beneficiary? ☐ Yes ☐ No

Name of irrevocable beneficiary(ies)	Relationship to the Member
--------------------------------------	----------------------------

☐ **Redemption**

Gross redemption: \$	
Deductions:	- Provincial tax %
	- Federal tax %
Net redemption: \$	

Section 4: Additional instructions**Section 5: Authorization**

Authorized person's name	X
Authorized person's name (if applicable)	X
Firm Name	Telephone
	Date

Beneva Inc. use the information provided in this application form for administrative purposes, with the exception of the social insurance number (SIN) which may only be used for tax purposes.

Reserved to Beneva

Investment
Client Services • Tel.: 1 877 841-8822

The form sent to Beneva constitutes the original document.