

GIC INVESTMENT APPLICATION

(Please Print) 



15233 Russell Ave.
White Rock, BC V4B 5C3

Ph: 604.538.3111 Toll Free: 1.800.663.4274

PLEASE MAKE YOUR CHEQUE PAYABLE TO FINANCIAL INSTITUTION

FINANCIAL INSTITUTION:

AGENT NO:

New Client: Yes: Client No: _____ Agent's Ref No: _____ Tel: () -

()
Last Name First Name and Initials Telephone No. Social Insurance No.

Street Apt.Suite No. City Province Postal Code

Joint Owner's Last Name First Name and Initials Social Insurance Number

Street Apt.Suite No. City Province Postal Code

Residency of Owner: Canada USA Other

JOINT OWNERS REGISTERED AS: Joint Owners with Rights of Survivorship
(Not applicable for residents of Quebec) Tenants in Common

All must sign for valid discharge (and) Any One may sign for valid discharge (or, and/or)

Issue date: _____ dd-MM-yyyy Maturity Date: _____ dd-MM-yyyy Interest Rate: _____ Term: _____ Principal: _____

Cashable After _____ Days Without Penalty

Interest Payment Frequency

Annually Semi-Annually Quarterly Monthly Paid at Maturity Compound Annually

Interest Instructions

Deposit my interest to my account at: _____ (Attach Void Cheque)
Financial Institution Branch Account Number

Send interest to: _____
Last Name First Name and Initials Address Postal Code

SPECIAL INSTRUCTIONS AND INFORMATION:

CLIENT ACKNOWLEDGEMENT

- * I/We hereby acknowledge and agree to the Financial Institutions Terms and Conditions for investment being applied for, which have been explained and/or given to me.
- * I/We confirm that the above instructions are correct and understand that interest ceases at maturity.
- * I/We can verify if this investment is insured by Canada Deposit Insurance Corporation (CDIC) at 1-800-461-2342 and accept full responsibility for principal and/or interest exceeding the limits of such insurance.
- * I/We shall advise all changes of address of owners and beneficiaries.
- * I/We have received a signed copy of this application and have given my advisor a cheque payable to or endorsed to the Financial Institution.
- * The agency will be paid a commission on this transaction.

Owner's Signature Date Joint Owner's Signature Date

ADVISOR'S ACKNOWLEDGMENT

I have received the principal and I have verified the client's identity

Advisor's Signature Date