

## Know Your Client (KYC)

### Account Type

☐ Non-Registered Account    ☐ Individual    ☐ Joint    ☐ Corporate    ☐ Other \_\_\_\_\_  
☐ Registered Account    ☐ RRSP    ☐ SRSP    ☐ RRIF    ☐ LRSP/LIRA    ☐ RESP    ☐ TFSA    ☐ Other \_\_\_\_\_

<b>Owner Name</b> <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr First Name _____ Last Name _____	<b>Joint Owner Name</b> <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr First Name _____ Last Name _____
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- ☐ **New Business – Complete all Sections and Sign**  
☐ **Update -** ☐ Client(s) has no changes to Section 1, 2 or 3. Proceed to sign on bottom of page 2.  
☐ Client(s) has change(s) to Section ☐ 1    ☐ 2    ☐ 3. Check the appropriate box(es), update accordingly and sign on bottom of page 2.

### 1. Client Personal Profile

<b>Owner Information</b> Address _____ _____ Tel _____ Cell _____ Email _____ Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Common Law <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed Occupation _____ Annual Income _____ ID Verification: <input type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> PR Card ID No. _____ Expiry Date _____	<b>Joint Owner Information</b> Address _____ _____ Tel _____ Cell _____ Email _____ Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Common Law <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed Occupation _____ Annual Income _____ ID Verification: <input type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> PR Card ID No. _____ Expiry Date _____
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### 2a. Risk Profile (circle the relevant score at the right and enter the total score on the Total Score box)

<b>A. Net worth range</b> Less than \$25,000 \$25,001 to \$50,000 \$50,001 to \$100,000 \$100,001 to \$250,000 Greater than \$250,000	<b>A</b> 1 3 5 7 10	<b>F. Need for income from investment</b> Very important Important Slightly important Not important at all	<b>F</b> 1 2 3 4
<b>B. Your financial objectives require long term returns of</b> Less than 6% 6% to 9% 10% to 12% Greater than 12%	<b>B</b> 1 5 10 15	<b>G. Sensitivity to adverse financial news in the media</b> I become very nervous and usually sell my investments I become fearful and consider selling my investments I would be uncomfortable but hold my investments I hold my investments calmly	<b>G</b> 1 2 3 4
<b>C. Investment timeline</b> Less than 2 years 3 to 5 years 6 to 10 years 11 to 20 years Over 20 years	<b>C</b> 1 3 5 10 15	<b>H. Performance numbers</b> I am most concerned with monthly performance numbers  I am most concerned with quarterly performance numbers  I am most concerned with annual performance numbers	<b>H</b> 1  3 5
<b>D. Access to money</b> Very important Important Slightly important Not important at all	<b>D</b> 1 2 3 4	<b>I. Speculative investments</b> I have never invested speculatively I have invested speculatively once I have invested speculatively twice I have invested speculatively three times or more	<b>I</b> 1 2 3 4
<b>E. Safety of your investment</b> I would sell my investment if it declined by 5% I would sell my investment if it declined by 15% I would sell my investment if it declined by 25% I would sell my investment if it declined by 50% I would not sell my investment even if it declined	<b>E</b> 1 2 3 4 5	<b>(Add scores from A – I) ENTER TOTAL SCORE</b> ⇨	
		<b>Total Score</b>	

### 2b. Based on the TOTAL SCORE on 2a, check the range in the table below and determine your Asset Allocation accordingly.

Score	Income / Cash	Growth / Equity
<input type="checkbox"/> < 12 ⇨ Low	85% or higher	15% or less
<input type="checkbox"/> 13 to 23 ⇨ Low to Medium	75%	25%
<input type="checkbox"/> 24 to 31 ⇨ Low to Medium	60%	40%
<input type="checkbox"/> 32 to 41 ⇨ Medium	45%	55%
<input type="checkbox"/> 42 to 51 ⇨ Medium to High	30%	70%
<input type="checkbox"/> > 52 ⇨ High	15% or less	85% or higher

### 3. Investment Goal

Invest Timeline	Investment Objectives	Risk Tolerance
<input type="checkbox"/> < 1 year <input type="checkbox"/> 2 to 3 years <input type="checkbox"/> 4 to 5 years <input type="checkbox"/> 6 to 7 years <input type="checkbox"/> 8 to 10 years <input type="checkbox"/> 11 to 20 years <input type="checkbox"/> over 20 years	<b>(must match the total score on 2a and the suggested Asset Allocation on 2b)</b>  Income / Cash _____ %  Growth / Equity _____ %  <b>Total 100 %</b>	<b><u>Income:</u></b> Low (less than 10% loss one year accepted) - _____ % <i>- For investors who are willing to accept lower return and capital preservation</i> Low to Medium (10% to 20% loss one year accepted) - _____ % <i>- For investors who can accept low to medium volatility investment vehicles</i>  <b><u>Growth:</u></b> Medium (21% to 30% loss one year accepted) - _____ % <i>- For investors who are looking for <b>moderate growth</b> over a longer period of time</i> Medium to High (31% to 40% loss one year accepted) - _____ % <i>- For investors who are looking for <b>long term growth</b> with relatively higher volatility</i> High (more than 40% loss one year accepted) - _____ % <i>- For investors who are <b>growth</b> oriented and can accept fluctuations in portfolio value</i>  <b>Total 100 %</b>

### 4. Acknowledgement

YES N/A

1. I understand that there are fees and sales charges associated with investments, which might affect the investment return. The advisor has explained them to me clearly.

☐ ☐

I now purchase fund with the fee option of (check one): ☐ NL ☐ FEL \_\_\_\_% ☐ CB \_\_\_\_ ☐ LSC\* ☐ DSC\*

**\*For LSC or DSC fee option, MUST complete a separate "Investment Fund Sales Charge Disclosure Form"**

☐ ☐

2. I understand that there are risks associated with the investment. The advisor will assess the suitability of the investments in my account(s) and I shall keep him/her informed of any changes of mine.

☐ ☐

3. a. I recognize the fact that I am applying for a leveraged investment (borrow money to invest), which will magnify returns and losses. (If yes, client must also fill out the "Leverage Loan Worksheet" for approval.)

☐ ☐

- b. If yes to 3a, the example below has been explained to me by the advisor.

☐ ☐

Cash Investment		Leveraged Investment
\$6,000	principal/annual interest payment for	\$100,000
- 50%	assumed annual return	- 50%
\$3,000	balance	\$ 50,000
	less loan amount	- \$100,000
	net loss	- \$ 50,000
- \$6,000	less principal/interest payment	- \$ 6,000
<b>- \$3,000</b>	<b>gross loss</b>	<b>- \$ 56,000</b>

- c. If yes to 3a, the advisor has explained the following to me and I meet the requirements.

☐ ☐

<b>Investment Knowledge</b>	Must be "Moderate" or "Extensive"
<b>Timeline</b>	Must be 8 years or more
<b>Investment Objectives</b>	At least 70% Growth
<b>Risk Tolerance</b>	- 42 points or above under KYC Section 2 - Risk Profile - A total of 70% on "Medium", "Medium to High" or "High"
<b>Additional requirements</b>	- Income & Asset Proof needed if loan amount is \$100,001 and above. - Detailed justification required if client is aged 60 or above.

5. I confirm that I have read, understood and agreed to the terms above.

☐

Additional Comments: \_\_\_\_\_

Owner Signature

Advisor Name

Joint Owner Signature

Advisor Signature

Date