



## Joint Client Application Form

The applicants must have the same time horizon, risk tolerance and investment objectives

### Primary applicant

#### Identification information

Title:  Mr.  Ms.  Mrs.  Miss  Dr.  Other: \_\_\_\_\_

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Initial: \_\_\_\_\_

Social Insurance Number \_\_\_\_\_ Date of birth (dd/mm/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

Country of citizenship: \_\_\_\_\_

Home address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Number of dependents: \_\_\_\_\_

#### Employment

Employer name: \_\_\_\_\_ Self employed

Employer address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Type of business: \_\_\_\_\_

Occupation/Job Title: \_\_\_\_\_ Years with current employer: \_\_\_\_\_

To which address should information be sent:  Home  Business

#### Financial information

Financial institution name: \_\_\_\_\_

Branch address: \_\_\_\_\_

Your annual income: \$ \_\_\_\_\_ Other sources of income \$ \_\_\_\_\_

Spouse's annual income: \$ \_\_\_\_\_ Spouse's other sources of income: \$ \_\_\_\_\_

Your estimated net worth (excluding your primary residence) \$ \_\_\_\_\_

Your estimated net liquid assets (cash and securities less liabilities outstanding against securities) \$ \_\_\_\_\_

#### Politically Exposed Foreign Person

Are you a Politically Exposed Foreign Person (**PEFP**) as defined below?

You are a PEFP if you currently hold or have ever held any of the following positions in the government of any country other than Canada:

- |   |  |
|---|--|
| (a) head of state or head of government;                                      | (f) judge;   |
| (b) president of a state-owned company or a state-owned bank;                 | (g) ambassador or attaché or counsellor of an ambassador;                  |
| (c) member of the executive council of government or member of a legislature; | (h) leader or president of a political party represented in a legislature; |
| (d) head of a government agency;  | (i) military officer with a rank of general or above;                      |
| (e) deputy minister or equivalent rank;                                       | (j) holder of any prescribed office or position.                           |

You are also a PEFP if you are the spouse, common-law partner, child, mother, father, brother, sister (including half brother/sister), spouse's or common-law partner's mother or father of any such person.

Yes  No If Yes, please indicate and give details:

## Joint applicant

### Identification information

Title:  Mr.  Ms.  Mrs.  Miss  Dr.  Other: \_\_\_\_\_

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Initial: \_\_\_\_\_

Social Insurance Number \_\_\_\_\_ Date of birth (dd/mm/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

Country of citizenship: \_\_\_\_\_

Home address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Number of dependents: \_\_\_\_\_

### Employment

Employer name: \_\_\_\_\_ Self employed

Employer address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Type of business: \_\_\_\_\_

Occupation/Job Title: \_\_\_\_\_ Years with current employer: \_\_\_\_\_

To which address should information be sent:  Home  Business

### Financial information

Financial institution name: \_\_\_\_\_

Branch address: \_\_\_\_\_

Your annual income: \$ \_\_\_\_\_ Other sources of income \$ \_\_\_\_\_

Spouse's annual income: \$ \_\_\_\_\_ Spouse's other sources of income: \$ \_\_\_\_\_

Your estimated net worth (excluding your primary residence) \$ \_\_\_\_\_

Your estimated net liquid assets (cash and securities less liabilities outstanding against securities) \$ \_\_\_\_\_

### Politically Exposed Foreign Person

Are you a Politically Exposed Foreign Person (PEFP) as defined below?

You are a PEFP if you currently hold or have ever held any of the following positions in the government of any country other than Canada:

- |   |  |
|---|--|
| (a) head of state or head of government;                                      | (f) judge;   |
| (b) president of a state-owned company or a state-owned bank;                 | (g) ambassador or attaché or counsellor of an ambassador;                  |
| (c) member of the executive council of government or member of a legislature; | (h) leader or president of a political party represented in a legislature; |
| (d) head of a government agency;  | (i) military officer with a rank of general or above;                      |
| (e) deputy minister or equivalent rank;                                       | (j) holder of any prescribed office or position.                           |

You are also a PEFP if you are the spouse, common-law partner, child, mother, father, brother, sister (including half brother/sister), spouse's or common-law partner's mother or father of any such person.

Yes  No If Yes, please indicate and give details:

## Investing information

The joint applicants must have the same time horizon, risk tolerance and investment objectives

Do you or the joint applicant, own or control, directly or indirectly, 10% or more of the voting rights of any publicly-traded company?  Yes  No If yes, provide details \_\_\_\_\_

Are you or the joint applicant, an insider, a director or officer of a publicly-traded company or an affiliate of publicly-traded company?  Yes  No If yes, provide details \_\_\_\_\_

What is the purpose of your dealing with Capital Street Group?  Long term investment  Short term investment  
 Other (specify) \_\_\_\_\_

What is your investment knowledge?  Limited  Good  High/Expert

Check **Limited** if you have only invested in simple securities such as savings bonds or well known common shares largely based on the advice of others.

Check **Good** if you have either traded in or have some knowledge of the basic characteristics of both fixed income securities and common shares, as well as basic understanding of the degree of risk and reward inherent in these types of securities.

Check **High/Expert** if you have a good business background, follow the markets regularly and have traded in and understand most types of investment securities.

Describe the types of investment instruments you have had experience with in the past: \_\_\_\_\_

Do you understand the concept of risk and return?  Yes  No

What would you prefer?  Low risk/Low return  Medium risk/Medium return  High risk/High return

Note: high risk means you could lose your total investment,  
medium risk means you may lose part of your investment,  
low risk means you are unlikely to lose part of your investment.

What is your investment objective? \_\_\_\_\_

What is the time horizon of your investment objective in years? \_\_\_\_\_

Do you have investments outside of Capital Street Group?  Yes  No

If yes, are they:  Low risk  Medium risk  High risk

What is the value of your investments outside of Capital Street Group? \_\_\_\_\_

## Client Signatures

We agree that Capital Street Group's liability will be limited to the fees earned in the event Capital Street Group is found through a legal proceeding to be liable for losses on investments or products purchased through it.

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

Print name: \_\_\_\_\_ Print name: \_\_\_\_\_

Date: \_\_\_\_\_

**For use by Capital Street Group Investment Service Inc.**

Did you meet the client in person?  Yes  No.

How did you verify the client's identity:

1. Reviewed identity document in the client's presence:

Document type \_\_\_\_\_ Number: \_\_\_\_\_ Expiry Date \_\_\_\_\_

2. Non face-to-face verification

(a)  Credit file in Canada over six months old (attach report)

(b)  Attestation method (attach attested identity document copy)

(c)  Verification of bank account: Bank \_\_\_\_\_ Account Number \_\_\_\_\_

Date verified \_\_\_\_\_ Name of bank employee \_\_\_\_\_

(d)  Cheque verification (attach photocopy of cheque)

(Verification can be done by 1 alone or combinations of 2(a) and 2(b) or (c), 2(b) and 2(c) or 2(b) and 2(d))

**Identity document reviewed by:**

Print name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Application checked by:**

Print name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Account Number: \_\_\_\_\_

Referral:  Yes  No Name of referrer: \_\_\_\_\_

Notes:

**Schedule A**  
**Certificate of accredited investor**

The Applicant certifies to Capital Street Group that the Applicant is an accredited investor as defined in NI 45-106 by virtue of being (please tick all applicable categories):

- (a) a person registered under the securities legislation of a jurisdiction of Canada as an adviser or dealer; or
- (b) an individual registered or formerly registered under the securities legislation of a jurisdiction of Canada as a representative of a person referred to in paragraph (a) other than a person registered solely as a limited market dealer under one or both of the *Securities Act* (Ontario) or the *Securities Act* (Newfoundland and Labrador); or
- (c) an individual who, either alone or with a spouse, beneficially owns, directly or indirectly, financial assets<sup>1</sup> having an aggregate realizable value that before taxes, but net of any related liabilities, exceeds \$1,000,000; or
- (d) an individual whose net income before taxes exceeded \$200,000 in each of the two (2) most recent calendar years or whose net income before taxes combined with that of a spouse exceeded \$300,000 in each of the two (2) most recent calendar years and who, in either case, reasonably expects to exceed that net income level in the current calendar year; or
- (e) an individual who, either alone or with a spouse, has net assets of at least \$5,000,000.

The above representation is true and accurate as of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Signature of client

\_\_\_\_\_  
Signature of Capital Street Group representative

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Print name of Capital Street Group representative

<sup>1</sup> **Financial assets** are defined in section 1.1 of NI 45-106 as:

- (a) cash,
- (b) securities, or
- (c) a contract of insurance, a deposit or an evidence of a deposit that is not a security for the purposes of securities legislation.



**Schedule B**  
**Certificate of permitted client**

The Applicant certifies to Capital Street Group that the Applicant is a permitted client as defined in National Instrument 31-103 by virtue of being (please tick all applicable categories):

- (a) an individual registered as an adviser or dealer or the equivalent, other than as a scholarship plan dealer or a restricted dealer, under the securities legislation of a jurisdiction of Canada or a foreign jurisdiction; or
- (b) an individual acting on behalf of a managed account managed by the individual, if the individual is registered or authorized to carry on business as an adviser or the equivalent under the securities legislation of a jurisdiction of Canada or a foreign jurisdiction; or
- (c) an individual who beneficially owns financial assets<sup>1</sup> having an aggregate realizable value that, before taxes but net of any related liabilities, exceeds \$5 million.

The above representation is true and accurate as of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Signature of client

\_\_\_\_\_  
Signature of Capital Street Group representative

\_\_\_\_\_  
Print name of client

\_\_\_\_\_  
Print name of Capital Street Group representative

- As a permitted client, I waive my right to receive client disclosure information.

\_\_\_\_\_  
Signature of client

- As a permitted client, I waive my right to a suitability determination of securities purchased from Capital Street Group.

\_\_\_\_\_  
Signature of client

\_\_\_\_\_

<sup>1</sup>Financial assets are defined in section 1.1 of NI 45-106 as:

- (a) cash,
- (b) securities, or
- (c) a contract of insurance, a deposit or an evidence of a deposit that is not a security for the purposes of securities legislation.

