

**FORM 33-109F1
NOTICE OF TERMINATION**

Complete this form to notify the appropriate Canadian securities regulator(s) or self-regulatory organization(s) (SRO) that a registered individual or permitted person has left the sponsoring firm.

Complete the paper version of this form if you are relying on the temporary hardship exemption in Regulation 31-102. Otherwise, complete and submit this form online at the national registration database (NRD) website at www.nrd.ca.

If you need more space, use a separate sheet of paper, clearly identifying the section and item. Please complete and sign the form, and send it to the appropriate Canadian securities regulator(s) or SRO(s).

A. Information about the terminating firm

1. Name
2. NRD number

B. Information about the terminated individual

1. Name
2. NRD number

C. Business location of the terminated individual

1. Address
2. NRD number

D. Information about the termination

1. Effective date dd/mm/yyyy
2. Reason for the termination

(check one)

- | | | Yes | No |
|-----------|---|--------------------------|--------------------------|
| Resigned | <input type="checkbox"/> ... for cause? | <input type="checkbox"/> | <input type="checkbox"/> |
| Dismissed | <input type="checkbox"/> ...for cause? | <input type="checkbox"/> | <input type="checkbox"/> |

Completed temporary employment contract

Retired

Deceased

Other (provide details)

E. Further details

(You do not have to provide the information in this Part unless the individual resigned or was dismissed. If so, you have until 30 days after the effective date of the termination to file your responses to the questions in this Part – the remainder of the Form should still be filed within 5 days of the effective date of the termination.)

If the individual resigned or was dismissed (whether or not for cause), explain why in the space provided and answer the following questions to the best of the firm's knowledge.

Reasons for dismissal or termination:

If the answer to any of the following questions is "yes", provide details (you may cross-reference the information provided immediately above if the relevant details have been set out there). Answers should be with reference to events in the past twelve months.

	Yes	No
1. If the individual resigned, was the resignation solicited by the firm?	<input type="checkbox"/>	<input type="checkbox"/>
2. Was the individual charged with any criminal offence?	<input type="checkbox"/>	<input type="checkbox"/>
3. Was the individual subject to any significant internal disciplinary measures at the firm or any affiliate of the firm?	<input type="checkbox"/>	<input type="checkbox"/>
4. Did any investors allege they lost money because the individual acted inappropriately? Such allegations include written complaints, civil actions and arbitration notices.	<input type="checkbox"/>	<input type="checkbox"/>
5. Does the individual have any undischarged financial obligations to clients of the firm? Examples include accounts which are not fully secured, margined or paid and in the opinion of the firm, are the result of bad business or credit practices on the part of the individual.	<input type="checkbox"/>	<input type="checkbox"/>

6. Has the firm or any affiliate suffered monetary loss or harm to its reputation as a result of the individual's actions?
7. Did the firm or any affiliate investigate the individual in connection with possible material violations of fiduciary duties, regulatory requirements or the compliance policies and procedures of the firm or any affiliate? Examples include making unsuitable trades or investment recommendations, stealing or borrowing client money or securities, hiding losses from clients, forging client signatures, money laundering, deliberately making false representations and engaging in undisclosed outside business activity.
8. Did the individual demonstrate a pattern of failing to follow compliance policies and procedures of the firm or any affiliate?
9. Did the individual engage in discretionary management of client accounts or otherwise engage in registerable activity without appropriate registration or without the firm's authorization?
10. Is there any other matter relating to the individual's termination or conduct leading up to it that the firm is aware of and believes is relevant to his or her suitability for registration?

F. Collection of personal information

Securities regulators may collect the personal information on this form only under the requirements in securities and/or derivatives legislation and may only use this information to administer and enforce provisions of the securities and/or derivatives legislation.

If you have any questions about the collection and use of this personal information, you can contact the securities regulator in the relevant jurisdiction. See Schedule A for details. In Québec, you can also contact the Commission d'accès à l'information at 1-888-528-7741 or visit its website at www.cai.gouv.qc.ca.

G. Warning

It is an offence to submit information that, in a material respect and at the time and in the light of the circumstances in which it is submitted, is misleading or untrue. In addition, failure to report materially significant information may lead to regulatory sanctions, including a fitness for registration review, or enforcement action against the firm and/or persons responsible for preparing this form. It should not be assumed that information is known to any securities regulatory authority merely because it is in the public domain or has previously been disclosed to one or more of them or any other

regulatory body. If there is any doubt about the relevance of information, it should be included.

H. Certification

Use the following certification when submitting this form in NRD format:

I am making this submission as agent for the NRD filer. By checking this box, I certify that all statements of fact in this submission were provided to me by a duly authorized firm representative of the NRD filer, who has confirmed to me that he or she has read and understood the warning set out above and that the information in this form is accurate and complete to the best of his or her knowledge and belief.

Use the following certification when submitting this form in paper format:

I certify that I have read and understand the warning set out above and that the information in this form is accurate and complete to the best of my knowledge and belief.

Name of firm

Name of authorized signing officer

Title of authorized signing officer

Signature

Date signed (dd/mm/yyyy)

**FORM 33-109F4
APPLICATION FOR REGISTRATION OF INDIVIDUALS AND PERMITTED
INDIVIDUALS**

In this form, “you”, “your” and “applicant” mean the person who is applying for registration or approval as an individual under [the national registration rule].

“Sponsoring firm” means the registered firm where you will carry out your duties as a registered or permitted individual.

Several terms used in this form are defined in the securities legislation of your province or territory. Please refer to those local definitions.

[*Online version*] If you have questions, please contact an authorized officer of your sponsoring firm or a legal adviser, or visit the national registration database (NRD) information website at www.nrd-info.ca.

[*Paper version*] Complete this form if you are relying on the temporary hardship exemption in Regulation 31-102. Otherwise, complete and submit this form online at the national registration database (NRD) website at www.nrd-info.ca.

If you need more space, use a separate sheet of paper, clearly identifying the section and item. Please complete and sign the form, and send it to the appropriate Canadian securities regulator(s), self-regulatory organization (SRO) or similar authority. The number of originally signed copies of the form you are required to submit depends on the province or territory, and jurisdiction.

Failure to answer all applicable questions may cause delays in the processing of the application form.

If you have questions, please contact an authorized officer of your sponsoring firm or a legal adviser, or visit the national registration database (NRD) information website at www.nrd-info.ca.

Item 1 – Name

1. Legal name

Last Name First Name Second Name (N/A) Third Name (N/A)

2. Other personal names

Are you currently, or have you ever been, known by any names other than your full legal name above?

Yes No

If "yes", complete Schedule A

3. Business names

Are you currently, or have you ever used, operated under, or carried on business under any name (e.g., trade names or style names) other than the name(s) mentioned above?

Yes No

If "yes", complete Schedule A

Item 2 – Residential address

Provide all residential addresses, including any foreign residential addresses, for the past 10 years.

1. Current residential address

Number, street

City, province, territory or state, country, postal code

Telephone number: _____

Lived at this address since (YYYY/MM)

If you have resided at this address for less than 10 years, complete Schedule B.

2. Mailing address

Check here if your mailing address is the same as your current residential address provided above. Otherwise, complete the following:

Number, street

City, province, territory or state, country, postal code

Item 3 – Personal information

1. Date of birth _____
(YYYY/MM/DD)

2. Place of birth

City, province, territory or state, country

3. Gender

Female Male

4. Eye colour

5. Hair colour

6. Height _____ in. _____ cm.

7. Weight _____ lbs. _____ kg.

Item 4 – Citizenship**Citizenship information**

What is your citizenship?

Canadian

Other, specify:

If you are a citizen of another country besides Canada, complete the following for that other citizenship:

Passport number: _____

Country of citizenship: _____

Date of issue: _____
(YYYY/MM/DD)

Place of issue:

(city, province, territory or state, country)

Item 5 – Registration jurisdictions

Indicate, by checking the appropriate box, each province or territory to which you are submitting this form:

Alberta

British Columbia

Manitoba

New Brunswick

Newfoundland and Labrador

Northwest Territories

Nova Scotia

Nunavut

- Ontario
- Prince Edward Island
- Québec
- Saskatchewan
- Yukon

Item 6 – Individual categories

Indicate, by checking the appropriate box in Schedule C, each registration category for which you are applying. If you are a permitted individual, indicate each category that describes your position with your sponsoring firm.

Item 7 – Address and agent for service

1. Address for service

You must have one address for service in each province or territory where you are submitting this form. A post office box is not an acceptable address for service. A residential address is acceptable. Complete Schedule D for each additional address for service you are providing.

Address for service:

Number, street

City, province or territory, postal code

Telephone number _____ Fax number, if available _____

E-mail address, if available _____

2. Agent for service

If you have appointed an agent for service, provide the following information for the agent in each province or territory where you have an agent for service. The address of

your agent for service must be the same as the address for service above. If your agent for service is a firm, also provide the name of your contact person.

Name for agent for service: _____

Contact person: _____
Last name, First Name

Item 8 - Proficiency

1. Course or examination information

Complete Schedule E to indicate each course and examination that you have successfully completed or have been exempted from. Under "Other", include any post-secondary education and all degrees and diplomas that are relevant to the registration that you are applying for.

2. Student numbers

If you have a student number for a course that was successfully completed with one of the following institutions, provide it below:

Canadian Securities Institute (CSI): _____

Investment Funds Institute of Canada (IFIC): _____

Institute of Canadian Bankers (ICB): _____

CFA Institute: _____

Canadian Association of Insurance and Financial Advisors (CAIFA): _____

3. Exemption refusal

Has any securities regulatory authority or self-regulatory organization refused to grant you an exemption from a course, examination or experience requirement?

Yes No

If "Yes", complete Schedule F.

Item 9 – Location of employment

Provide the following information for the location of the sponsoring firm at which you will be working. If you will be working out of more than one location, provide the

following information for the location out of which you will be doing most of your business.

NRD location number: _____

Branch Transit number/Cost Centre Number, if applicable: _____

Business address: _____
(number, street, city, province, territory or state, country, postal code)

Telephone number: (____) _____ Fax number: (____) _____

[The following is for the paper version only]

Type of Location: Head Office Branch Sub-branch

Name of Branch Manager: _____

Effective date: _____

Check here if the mailing address of the location is the same as the business address provided above. Otherwise, complete the following:

Mailing address: _____
(number, street, city, province, territory or state, country, postal code)

Item 10 - Current employment and other business activities

Employment information and other business activities

On Schedule G, provide the information requested for each of your current business and employment activities, including those with your sponsoring firm and outside of your sponsoring firm. If you are applying for a type of registration that requires specific experience, include details of that experience (for example, level of responsibility, value of accounts under direct supervision, number of years of that experience and research experience, as well as percentage of time spent on each activity).

Item 11 - Previous employment

Employment information

On Schedule H, provide complete employment history for the 10-year period before the date of this application.

Item 12 – Resignations and terminations

Have you ever resigned, been terminated or discharged by an employer for cause from a position following allegations that you:

- (a) Violated any statutes, regulations, rules or standards of conduct?

Yes No

If “Yes”, complete Schedule I

- (b) Failed to supervise compliance with any statutes, regulations, rules or standards of conduct?

Yes No

If “Yes”, complete Schedule I

- (c) Committed fraud or the wrongful taking of property, including theft?

Yes No

If “Yes”, complete Schedule I

Item 13 – Regulatory disclosure

In this Form, “derivatives” means financial instruments, such as futures contracts, options and swaps whose market price, value or payment obligations are derived from or based on one or more underlying interests. Derivatives can be in the form of instruments, agreements or securities.

“Major shareholder” means a shareholder who, in total, directly or indirectly holds voting securities carrying 10 per cent or more of the votes carried by all outstanding voting securities.

“Approved person” means, in respect of a member of the IDA (Member), an individual who is a partner, director, officer, employee or agent of a Member who is approved by the IDA or another Canadian self-regulatory organization to perform any function required under any IDA By-law, Regulation, or Policy.

1. Securities regulatory authorities

(a) Are you now, or have you ever been, registered or licensed with any securities regulator in any province, territory, state or country to trade in or advise on securities or derivatives?

Yes No

Check here if the information has been recorded on NRD under the NRD number you are using to make this submission. Otherwise, complete Schedule J, section 1(a)

(b) Have you ever been refused registration or a license to trade in or advise on securities or derivatives in any province, territory state or country?

Yes No

If "Yes", complete Schedule J, section 1(b)

(c) Have you ever been denied the benefit of any exemption from registration provided by any securities regulator in any province, territory, state or country, other than what was disclosed in Item 8(3) of this form?

Yes No

If "Yes", complete Schedule J, section 1(c)

(d) Are you now, or have you ever been subject to any disciplinary proceedings or any order resulting from disciplinary proceedings under any securities legislation or derivatives legislation in any province, territory, state or country?

Yes No

If "Yes", complete Schedule J, section 1(d)

2. *Self-regulatory organizations*

(a) Are you now, or have you ever been, an approved person of a self-regulatory organization or similar organization in any province, territory, state or country?

Yes No

Check here if the information has been recorded on NRD under the NRD number you are using to make this submission. Otherwise, complete Schedule J, section 2(a).

(b) Have you ever been refused becoming an approved person of a self-regulatory organization or similar organization in any province, territory, state or country?

Yes No

If "Yes", complete Schedule J, section 2(b).

(c) Are you now, or have you ever been subject to any disciplinary proceedings conducted by any self-regulatory organization or similar organization in any province, territory, state or country?

Yes No

If "Yes", complete Schedule J, section 2(c).

3. *Non-securities regulation*

(a) Are you now, or have you ever been, registered or licensed under any legislation which requires registration or licensing to deal with the public in any capacity other than to trade in or advise on securities or derivatives in any province, territory, state or country (e.g. insurance, accountant, lawyer, teacher)?

Yes No

If "Yes", complete Schedule J, section 3(a)

(b) Have you ever been refused registration or a license under any legislation relating to your professional qualifications unrelated to securities in any province, territory, state or country?

Yes No

If "Yes", complete Schedule J, section 3(b)

(c) Are you now, or have you ever been a subject of any disciplinary actions conducted under any legislation relating to your professional qualifications unrelated to securities in any province, territory, state or country?

Yes No

If "Yes", complete Schedule J, section 3(c)

Item 14 – Criminal disclosure

Offences under federal statutes such as the *Income Tax Act (Canada)* and the *Immigration Act (Canada)* constitute criminal offences and must be disclosed when answering this question. It should be noted that pleas or findings of guilt for impaired driving are *Criminal Code (Canada)* matters and must be disclosed. Where you have pleaded guilty or been found guilty of an offence, such offence must be reported even though an absolute or conditional discharge has been granted.

You are not required to disclose speeding, parking violations or any offence for which a pardon has been granted under the *Criminal Records Act (Canada)* and such pardon has not been revoked. Under such circumstances, the appropriate response would be “No”.

If you do not tell us about an offence under any statute other than the *Young Offenders Act (Canada)*, we may treat it as a non-disclosure of material information.

(a) Are there any outstanding or stayed charges against you alleging an offence that was committed in any province, territory, state or country?

Yes No

If “Yes”, complete Schedule K, section (a).

(b) Have you ever been convicted of, or pleaded guilty or no contest to, or were granted an absolute or conditional discharge from, any offence that was committed in any province, territory, state or country?

Yes No

If “Yes”, complete Schedule K, section (b).

(c) Are there any outstanding charges against any firm of which you were, at the time the offence was alleged to have taken place in any province, territory, state or country, a partner, director, officer or major shareholder?

Yes No

If “Yes”, complete Schedule K, section (c).

Check here if the firm is your sponsoring firm or a firm that is or was registered in a Canadian jurisdiction and identified in response to Item 13(1)(a) and/or recorded on NRD. Otherwise, complete Schedule K, section (c).

(d) Has any firm, when you were a partner, officer, director or major shareholder, ever been convicted of or pleaded guilty or no contest to, or was granted an absolute or conditional discharge from, an offence that was committed in any province, territory, state or country?

Yes No

If "Yes", complete Schedule K, section (d).

Check here if the firm is your sponsoring firm or a firm that is or was registered in a Canadian jurisdiction and identified in response to Item 13(1)(a) and/or recorded on NRD. Otherwise, complete Schedule K, section (d).

Item 15 – Civil disclosure

(a) Are there currently any outstanding civil actions alleging fraud, theft, deceit, misrepresentation, or similar conduct against you in any province, territory, state or country?

Yes No

If "Yes", complete Schedule L, section (a).

(b) Have you ever been a defendant or respondent in any civil proceeding in which fraud, theft, deceit, misrepresentation, or similar conduct is, or was, successfully established in a judgement in any province, territory, state or country?

Yes No

If "Yes", complete Schedule L, section (b).

Item 16 – Financial disclosure

1. Bankruptcy

Under the laws of any applicable jurisdictions, have you, or has any firm when you were a partner, director, officer or major shareholder of that firm:

(a) Had a petition in bankruptcy issued against you or the firm or made a voluntary assignment in bankruptcy?

Yes No

If "Yes", complete Schedule M, section 1(a)

(b) Made a proposal under any legislation relating to bankruptcy or insolvency?

Yes No

If "Yes", complete Schedule M, section 1(b)

(c) Been subject to proceedings under any legislation relating to the winding up, the dissolution, or the companies' creditors arrangement?

Yes No

If "Yes", complete Schedule M, section 1(c)

(d) Been subject to or initiated any proceedings, arrangement or compromise with creditors. This includes having a receiver, receiver-manager, administrator or trustee appointed by or at the request of creditors, privately, through court process or by order of a regulator, to hold your assets?

Yes No

If "Yes", complete Schedule M, section 1(d)

2. Debt Obligations

Have you ever failed to meet a financial obligation of \$5,000 or more as it came due, or has any firm, while you were a partner, director, officer or major shareholder of, failed to meet a financial obligation as it came due?

Yes No

If "Yes", complete Schedule M, section 2.

3. Surety bond or fidelity bond

Have you ever been refused for a surety or fidelity bond?

Yes No

If "Yes", complete Schedule M, section 3.

4. Garnishments, unsatisfied judgements or directions to pay

Has any federal, provincial, territorial or state authority ever issued any of the following against you:

	Yes	No
Garnishment	<input type="checkbox"/>	<input type="checkbox"/>
Unsatisfied judgement	<input type="checkbox"/>	<input type="checkbox"/>
Direction to pay	<input type="checkbox"/>	<input type="checkbox"/>

If "Yes", complete Schedule M, section 4.

Item 17 – Ownership of securities firms

Are you now, or have you ever been, a partner or major shareholder of any firm (including your sponsoring firm) whose business is trading in or advising on securities or derivatives?

Yes No

If "Yes", complete Schedule N

Check here if the information has been recorded on NRD under the NRD number you are using to make this submission. Otherwise, complete Schedule N.

Agent for service

By submitting this form, you certify that in each Canadian jurisdiction where you have appointed an agent for service, you have completed the appointment of agent for service required in that jurisdiction.

Submission to jurisdiction

By submitting this form, you:

- are subject to the securities and/or derivatives legislation of each Canadian jurisdiction and you agree that you are subject to the by-laws, regulations, rules, rulings and policies (hereunder collectively referred to as "rules") of the self regulatory organizations (SROs) to which you have submitted this form, including the jurisdiction of any tribunals or any proceedings that relate to your activities as a registrant or a partner, director or

officer of a registrant under that securities and/or derivatives legislation or as an Approved Person under those SRO rules.

Collection and use of personal information

Securities regulators require personal information about you as part of the review of your application for registration or approval, and if you are approved, to assess whether you continue to meet the registration requirements.

This information is collected under the requirements set out in securities and/or derivatives legislation and SRO rules and will only be used to administer and enforce provisions of this legislation or SRO rules. In addition to personal information collected on this form, securities regulators may also need to collect personal information from other government organizations, law enforcement bodies, self regulatory bodies, and private sector organizations. This information may include police records, regulatory records, credit records and other employment records.

By submitting this form, you consent to the collection and disclosure of your personal information by securities regulators for registration and other related regulatory purposes.

If you have any questions about the collection and use of your personal information, contact the securities regulator in the relevant jurisdiction. Please see Schedule O for details. In Québec, you can also contact the Commission d'accès à l'information at 1-888-528-7741 or visit its website at www.cai.gouv.qc.ca.

Self-Regulatory Organizations

The principal purpose for the collection of personal information is to assess your suitability for registration or approval and to assess your continued fitness for registration or approval in accordance with the applicable securities legislation and the rules of the self-regulatory organizations.

By submitting this application, you authorize the self-regulatory organizations to which this application is submitted to collect any information from any source whatsoever, including, but not limited to, personal confidential information about you that is otherwise protected by law such as, police, credit, employment, education and proficiency course completion records, and records from other government or non-governmental regulatory authorities, securities commissions, stock exchanges, or other self-regulatory organizations, private bodies, agencies, individuals or corporations, as may be necessary for the self-regulatory organizations to complete their review of your application or continued fitness for registration or approval in accordance with their rules for the duration of the period you remain so registered or approved. You further consent to and authorize the transfer of confidential information between self-regulatory organizations, securities commissions or stock exchanges to which you now, or may in the future, apply for registration or approval, or with which you are currently registered or approved for the purpose of determining

fitness or continued fitness for registration or approval or in connection with the performance of an investigation or other exercise of regulatory authority, whether or not you are registered with or approved by them.

By submitting this application, you certify that you are conversant with the rules of the applicable self-regulatory organizations of which you are seeking registration or approval or of which your sponsoring firm is a member or participating organization. You also undertake to become conversant with the rules of any self-regulatory organizations of which you or your sponsoring firm becomes a member or participating organization. You agree to be bound by, observe and comply with these rules as they are from time to time amended or supplemented, and you agree to keep yourself fully informed about them as they are amended and supplemented. You submit to the jurisdiction of the self-regulatory organizations to which you are applying for registration or approval, or of which your sponsoring firm is now or in the future becomes a member or participating organization and, wherever applicable, their Governors, Directors and Committees. You agree that any registration or approval granted pursuant to this application may be revoked, terminated or suspended at any time in accordance with the then applicable rules of the respective self-regulatory organizations. In the event of any such revocation or termination, you must terminate all activities which require registration or approval and, thereafter, not perform services that require registration or approval for any member of the self-regulatory organizations or any approved affiliated company or other affiliate of such member without obtaining the approval of or registration with the self-regulatory organizations, in accordance with their rules.

By submitting this application, you undertake to notify the self-regulatory organizations to which you are applying for registration or approval or with which you are currently or may in the future be registered or approved of any material change to the information herein provided in accordance with their respective rules. You agree to the transfer of this application form, without amendment, to other self-regulatory organizations in the event that at some time in the future you apply to such other self-regulatory organizations for registration or approval.

You certify that you have discussed the questions in this application, together with this Agreement, with an Officer or Branch Manager of your sponsoring member firm and, to your knowledge and belief, the authorized Officer or Branch Manager was satisfied that you fully understood the questions and the terms of this Agreement. You further certify that your business activities will be limited strictly to those permitted by the category of your registration or approval.

It is an offence under securities and/or derivatives legislation to provide false or misleading information on this form.

[Online version]

Certification

I am making this submission as agent for the applicant. By checking this box, I certify that the applicant provided me with all of the information on this form.

[Paper version]

Signatures**Applicant**

By signing below, you confirm that:

- you have read and understand the questions in this form
- you understand that it is an offence under [the securities and/or derivatives legislation] to provide false or misleading information on this form
- all of the information provided on this form is true.

Signature of applicant

Date

Authorized partner or officer

By signing below, you confirm that:

- the applicant will be engaged by the sponsoring firm as a registered individual or a permitted individual
- you have discussed the questions set out in this form with the applicant and are satisfied that he or she fully understands the questions.

Name of firm _____

Name of authorized signing officer _____

Title of authorized signing officer _____

Signature _____

Date signed _____

(YYYY/MM/DD)

**SCHEDULE A
NAME**

Item 1

Other personal names

Last name	First name	Second name (if applicable)	Third name (if applicable)
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Provide the reasons for the use of this name (for example, marriage, divorce, court order, commonly used name, nickname, style names or trade names).

When did you use this name? From: _____ To: _____
(YYYY/MM) (YYYY/MM)

Last name	First name	Second name (if applicable)	Third name (if applicable)
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Provide the reasons for the use of this name (for example, marriage, divorce, court order, commonly used name, nickname, style names or trade names).

When did you use this name? From: _____ To: _____
(YYYY/MM) (YYYY/MM)

Last name	First name	Second name (if applicable)	Third name (if applicable)
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Provide the reasons for the use of this name (for example, marriage, divorce, court order, commonly used name, nickname, style names or trade names).

When did you use this name? From: _____ To: _____
(YYYY/MM) (YYYY/MM)

Business names

Name: _____

Provide the reason(s) for the use of this name:

When did you use this name? From: _____ To: _____
(YYYY/MM) (YYYY/MM)

If the name is/was used in connection with your sponsoring firm, did the sponsoring firm approve the use of the name?

Name : _____

Provide the reason/s for the use of this name:

When did you use this name? From: _____ To: _____
(YYYY/MM) (YYYY/MM)

**SCHEDULE B
RESIDENTIAL ADDRESS****Item 2****Previous addresses**

A postal code (or ZIP code) and a telephone number are not required for any previous address.

Residential address: _____
(number, street, city, province, territory or state, country)

When did you live at this address? From: _____ To: _____
(YYYY/MM) (YYYY/MM)

Residential address: _____
(number, street, city, province, territory or state, country)

When did you live at this address? From: _____ To: _____
(YYYY/MM) (YYYY/MM)

Residential address: _____
(number, street, city, province, territory or state, country)

When did you live at this address? From: _____ To: _____
(YYYY/MM) (YYYY/MM)

Residential address: _____
(number, street, city, province, territory or state, country)

When did you live at this address? From: _____ To: _____
(YYYY/MM) (YYYY/MM)

Residential address: _____
(number, street, city, province, territory or state, country)

When did you live at this address? From: _____ To: _____
(YYYY/MM) (YYYY/MM)

**SCHEDULE C
INDIVIDUAL CATEGORIES****Item 6****Categories**

Indicate, by checking the appropriate box, each category for which you are applying.

Individual Category Information**Relationship with Sponsoring Firm**

- Officer
- Partner
- Director
- Sole Proprietor
- Investor
- Representative – Employee
- Representative – Non-Employee

Supervisory Roles

- Compliance Officer
- Branch Manager
- Co-Branch Manager
- Assistant Branch Manager
- Chief Compliance Officer
- Ultimate Designated Person
- Alternate Designated Person
- Designated Options Principal
- Alternate Options Principal
- Designated Futures Options Principal
- Alternate Futures Options Principal
- Futures Contract Options Supervisor

Products

- Securities
- Mutual Funds
- Scholarship Plans

Traders

- Floor Trader
- Floor Broker
- Local

- Trader – CATS
- Trader – TradeCDNX
- Trader – Commodity Floor Trader

Registration by Jurisdiction

	Trading	Advising	Associate
Alberta	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
British Columbia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manitoba	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
New Brunswick	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Newfoundland and Labrador	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Northwest Territories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nova Scotia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nunavut	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ontario	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prince Edward Island	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Québec	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Saskatchewan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yukon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Investment Dealers Association of Canada – Additional Information

Partner, Director, Investor (check one)

- Industry
- Non-Industry

Representative (check one)

- Registered Representative
- Investment Representative

**SCHEDULE D
ADDRESS AND AGENT FOR SERVICE****Item 7****1. Address for service**

You must have one address for service in each province or territory in which you are now, or are applying to become, a registered individual or permitted individual. A post office box is not an acceptable address for service.

Address for service: _____
(number, street, city, province or territory, postal code)

Telephone number: (____) _____ Fax number: (____) _____

E-mail address: _____

2. Agent for service

If you have appointed an agent for service, provide the following information for the agent. The address for service provided above must be the address of the agent named below.

Name of agent for service:
(if applicable)

Contact person: _____
Last name First name

**SCHEDULE E
PROFICIENCY****Item 8**

COURSE OR EXAMINATION	DATE COMPLETED	DATE EXEMPTED AND BY WHICH JURISDICTION OR REGULATOR (YYYY/MM/DD)
OTHER		

**SCHEDULE F
PROFICIENCY****Item 8****Exemption refusal**

Complete the following for each exemption that was refused.

Which securities regulatory authority or self-regulatory organization refused to grant the exemption?

State the name of the course, examination or experience requirement:

State the reason given for not being granted the exemption:

Date exemption refused: _____
(YYYY/MM/DD)

Which securities regulatory authority or self-regulatory organization refused to grant the exemption?

State the name of the course, examination or experience requirement:

State the reason given for not being granted the exemption:

Date exemption refused: _____
(YYYY/MM/DD)

**SCHEDULE G
CURRENT EMPLOYMENT AND OTHER BUSINESS ACTIVITIES**

Item 10

Full-time student

Employed or self-employed

From: _____
(YYYY/MM/DD)

You are only required to fill in the following if you have indicated above that you are employed or self-employed.

Current Employment information

Check here if your employment is with your sponsoring firm. If not, provide the following information:

Name of business or employer:

Address of business or employer:

(number, street, city, province, territory or state, country)

Name and title of your immediate supervisor:

For your sponsoring firm, include the duties you currently perform and intend to perform.

Describe all other employment or business activities, whether or not the activities are related to investments. Include the nature of the business, your duties, start date, title or relationship with the business (including director or officer positions).

Indicate the number of hours per week you will be devoting to this business or employment.

Check here if you are working more than 30 hours per week for the sponsoring firm. Otherwise, explain why you are working less than 30 hours per week for the sponsoring firm.

Disclose any potential for confusion by clients and any potential for conflicts of interest arising from your proposed activities as a registrant with affiliated or unaffiliated sponsoring firm(s) and with the other business described above (include whether the other business is listed on an exchange). Confirm whether the firm has procedures for minimizing potential conflicts of interest and confirm that you are aware of these procedures.

SCHEDULE H PREVIOUS EMPLOYMENT

Item 11

Previous employment information

Provide the information requested for your previous business and employment activities for the 10-year period before the date of this application. Account for all time including full and part-time employments, self-employment, military service and homemaking. Include statuses such as unemployed, full-time education, extended travel, or other similar statuses. (Please do not include short-term employment (four months or less) while a student unless it was in the securities industry.)

In addition, provide the information requested for all of your securities or derivatives (including exchange contracts and options) business and employment activities during and prior to the ten-year period.

Unemployed

Full-time student

Employed or self-employed

From: _____
(YYYY/MM)

To: _____
(YYYY/MM)

You are only required to fill in the following if you have indicated above that you are, or were, employed or self-employed.

Start date: _____
(YYYY/MM)

End date: _____
(YYYY/MM)

Name of business or employer:

Address of business or employer:

Number, street, city, province, territory or state, country

Name and title of immediate supervisor, if applicable. _____

Describe the firm's business, your position, duties and your relationship to the firm. If you are applying for a type of registration that requires specific experience, include details of that experience (for example, level of responsibility, value of accounts under direct supervision, number of year of that experience and research experience, as well as percentage of time spent on each activity):

Reason why you left the firm

Start date: _____
(YYYY/MM)

End date: _____
(YYYY/MM)

Name of business or employer:

Address of business or employer:

Number, street, city, province, territory or state, country

Name and title of immediate supervisor, if applicable. _____

Describe the firm's business and your duties. If you applying for a type of registration that requires specific experience, include details of that experience (for example, level of responsibility, value of accounts under direct supervision, number of year of that experience and research experience, as well as percentage of time spent on each activity):

Reason why you left the firm

**SCHEDULE I
RESIGNATIONS AND TERMINATIONS****Item 12**

For each resignation, termination or employment that was discharged for cause, indicate below, (1) the name of the firm from which you resigned, were terminated or discharged for cause, (2) whether you resigned, were terminated or discharged for cause, (3) the date you resigned, were terminated or discharged for cause, and (4) the circumstances relating to your resignation, termination or discharge for cause.

SCHEDULE J REGULATORY DISCLOSURE

Item 13

1. Securities regulatory authorities

(a) For each registration or license, indicate below (1) the name of the firm, (2) the securities regulatory authority with which you are, or were, registered or licensed, (3) the type or category of registration or license, and (4) the dates between which you held the registration or license.

(b) For each registration or license refused, indicate below (1) the name of the firm, (2) the securities regulatory authority that refused the registration or license, (3) the type or category of registration or license refused, (4) the date of the refusal, and (5) the reasons for the refusal.

(c) For each exemption from registration denied or license refused, *other than what was disclosed in Item 8(3) of this form*, indicate below (1) the party that was refused the registration or license, (2) the securities regulatory authority that refused the registration or license, (3) the type or category of registration or license refused, (4) the date of the refusal, and (5) the reasons for the refusal.

(d) For each order or disciplinary proceeding, indicate below (1) the name of the firm, (2) the securities regulatory authority that issued the order or is conducting or conducted the proceeding, (3) the date any notice of proceeding was issued, (4) the date any order or settlement was made, (5) a summary of any notice, order or settlement (including any sanctions imposed), (6) whether you are or were a partner, director, officer or major shareholder of the firm and named individually in the order or disciplinary proceeding, and (7) any other relevant details.

2. *Self-regulatory organizations*

(a) For each approval, indicate below (1) The name of the firm, (2) the self-regulatory organization which you are or were an approved person, (3) the categories of approval, and (4) the dates you held the approval.

(b) For each approval refused, indicate below (1) the name of the firm, (2) the self-regulatory organization that refused the approval, (3) the category of approval refused, (4) the date of the refusal, and (5) the reasons for the refusal.

(c) For each order or disciplinary proceeding, indicate below (1) the name of the firm, (2) the self-regulatory organization that issued the order or that is, or was, conducting the proceeding, (3) the date any notice of proceeding was issued, (4) the date any order or settlement was made, (5) a summary of any notice, order or settlement (including any sanctions imposed), (6) whether you are or were a partner, director, officer or major shareholder of the firm and named individually in the order or disciplinary proceeding, and (7) any other information that you think is relevant or that is requested by the regulator.

3. *Non-securities regulation*

(a) For each registration or license, indicate below (1) who the party is, or was, registered or licensed, (2) with which regulatory authority, or under what legislation, the party is, or was, registered or licensed, (3) the type or category of registration or license, and (4) the dates between which the party held the registration or license.

(b) For each registration or license refused, indicate below (1) the party that was refused registration or licensing, (2) with which regulatory authority, or under what

legislation, the registration or license was refused, (3) the type or category of registration or license refused, (4) the date of the refusal, and (5) the reasons for the refusal.

(c) For each order or disciplinary proceeding, indicate below (1) the party against whom the order was made or the proceeding taken, (2) the regulatory authority that made the order or that is, or was, conducting the proceeding, or under what legislation the order was made or the proceeding is being, or was conducted, (3) the date any notice of proceeding was issued, (4) the date any order or settlement was made, (5) a summary of any notice, order or settlement (including any sanctions imposed), (6) whether you are or were a partner, director, officer or major shareholder of the firm and named individually in the order or disciplinary proceeding and (7) any other information that you think is relevant or that is requested by the regulator.

**SCHEDULE K
CRIMINAL DISCLOSURE****Item 14****Criminal offences**

(a) For each charge, indicate below (1) the type of charge, (2) the date of the charge, (3) any trial or appeal dates, and (4) the court location.

(b) For each conviction, indicate below (1) the offence, (2) the date of the conviction, and (3) the disposition (state any penalty or fine and the date any fine was paid).

(c) For each charge, indicate below (1) the name of the firm, (2) the type of charge, (3) the date of the charge, (4) any trial or appeal dates, and (5) the court location.

(d) For each conviction, indicate below (1) the name of the firm, (2) the offence, (3) the date of the conviction, and (4) the disposition (state any penalty or fine and the date any fine was paid).

**SCHEDULE L
CIVIL DISCLOSURE****Item 15**

(a) For each current and outstanding civil proceeding, state below (1) the dates the statement of claim and statement of defence were issued, (2) each plaintiff in the proceeding, (3) whether the proceeding is pending or on appeal, (4) whether the civil proceeding was about a firm where you are or were a partner, director, officer or major shareholder and whether you have been named individually in the allegations, and (5) the jurisdiction where the action is being pursued.

(b) For each civil proceeding, state below (1) the dates the statement of claim and statement of defence were issued, (2) each plaintiff in the proceeding, (3) the jurisdiction where the action was pursued, (4) whether the civil proceeding was about a firm where you are, or were a partner, director, officer or major shareholder and whether you have been named individually in the allegations and (5) a summary of any disposition or any settlement over \$10,000. (Disclosure must include those actions settled without admission of liability.)

SCHEDULE M FINANCIAL DISCLOSURE

Item 16

1. Bankruptcy

(a) For each event, indicate below (1) the date of the petition or voluntary assignment, (2) the person or firm about whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a summary of any disposition or settlement, (7) date of discharge or release, if applicable, and (8) any other information that you think is relevant or that is requested by the regulator.

(b) For each event, indicate below (1) the date of the proposal, (2) the person or firm about whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a summary of any disposition or settlement, and (7) any other information that you think is relevant or that is requested by the regulator.

(c) For each event, indicate below (1) the date of the proceeding, (2) the person or firm about whom this disclosure is being made, (3) the status of the matter, (4) a summary of any disposition or settlement, and (5) any other information that you think is relevant or that is requested by the regulator.

(d) For each proceeding, arrangement or compromise with creditors, indicate below (1) the date of the proceeding, (2) the person or firm about whom this disclosure is being made, (3) the status of the matter, (4) a summary of any disposition or settlement, and (5) any other information that you think is relevant or that is requested by the regulator.

2. Debt Obligation

For each event, indicate below (1) the person or firm that failed to meet its financial obligation, (2) the amount that was owing at the time the person or firm failed to meet its financial obligation, (3) the person or firm to whom the amount is, or was, owing, (4) any relevant dates (for example, when payments are due or when final payment was made), (5) any amounts currently owing, and (6) any other information that you think is relevant or that is requested by the regulator.

3. Surety Bond or Fidelity Bond

For each bond refused, indicate below (1) the name of the bonding company, (2) the address of the bonding company, (3) the date of the refusal, and (4) the reasons for the refusal.

4. Garnishments, Unsatisfied Judgements or Directions to Pay

For each garnishment, unsatisfied judgement or direction to pay, indicate below (1) the amount that was owing at the time the garnishment, judgement or direction to pay was rendered, (2) the person or firm to whom the amount is, or was, owing, (3) any relevant dates (for example, when payments are due or when final payment was made), (4) the percentage of earnings to be garnished, (5) any amounts currently owing, and (6) any other information that you think is relevant or that is requested by the regulator.

**SCHEDULE N
OWNERSHIP OF SECURITIES FIRMS**

Item 17

Indicate below (a) the name of the firm and (b) your relationship to the firm.

(a) Firm name:

(b) Relationship to the firm and period of relationship:

Partner

From: _____ / _____ To: _____ / _____ (if applicable)
(YYYY/MM) (YYYY/MM)

Major shareholder (as defined in Item 13 of this form)

From: _____ / _____ To: _____ / _____ (if applicable)
(YYYY/MM) (YYYY/MM)

If you are a partner or major shareholder of the firm, provide the following information:

(a) State the number, value, class and percentage of securities or the amount of partnership interest you own or propose to acquire upon approval. If acquiring shares upon approval, state source (for example, treasury shares, or if upon transfer, state name of transferor).

(b) State the value (approximate, if necessary) of subordinated debentures or bonds of the firm to be held by you or any other subordinated loan to be made by you to the firm (if applicable):

(c) If another person or firm has provided you with funds to invest in the firm, identify the person or firm and state the relationship between you and that person or firm:

(d) Are the funds to be invested (or proposed to be invested) guaranteed directly or indirectly by any person or firm?

Yes No

If “Yes”, identify the person or firm and state the relationship between you and that person or firm:

(e) Have you either directly or indirectly given up any rights with respect to such securities or partnership interest, or do you, on approval of this application, intend to give up any such rights (including by hypothecation, pledging or depositing as collateral the securities or partnership interest with any institution or person?)

Yes No

If “Yes”, identify the person or firm, state the relationship between you and that person or firm and describe the rights that have been or will be given up:

(f) Is a person other than you the beneficial owner of the shares, bonds, debentures, partnership units or other notes held by you?

Yes No

If “Yes”, complete (g), (h) and (i).

(g) Name of beneficial owner:

Last name	First name	Second name (if applicable)	Third name (if applicable)
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(h) Residential address:

(number, street, city, province, territory or state, country, postal code)

(i) Occupation:

**SCHEDULE O
WHO TO CONTACT IF YOU HAVE QUESTIONS ABOUT THE COLLECTION
AND USE OF YOUR PERSONAL INFORMATION.**

Contact Information

Alberta

Alberta Securities Commission,
4th Floor, 300 B 5th Avenue S.W.
Calgary, AB T2P 3C4
Attention: Information Officer
Telephone: (403) 297-6454

British Columbia

British Columbia Securities Commission
P.O. Box 10142, Pacific Centre
701 West Georgia Street
Vancouver, BC V7Y 1L2
Attention: Freedom of Information Officer
Telephone: (604) 899-6500 or (800) 373-6393 (in BC)

Manitoba

The Manitoba Securities Commission
500 – 400 St. Mary Avenue
Winnipeg, MB R3C 4K5
Attention: Director – Legal
Telephone: (204) 945-0605

New Brunswick

New Brunswick Securities Commission
Suite 300, 85 Charlotte Street
Saint John, NB E2L 2J2
Attention: Director, Market Regulation
Telephone: (506) 658-3021

Newfoundland and Labrador

Securities Commission of Newfoundland and Labrador
P.O. Box 8700, 2nd Floor, West Block
Confederation Building
St. John's, NF A1B 4J6
Attention: Director of Securities
Tel: (709) 729-4189

Nova Scotia

Nova Scotia Securities Commission
2nd Floor, Joseph Howe Building
1690 Hollis Street
P.O. Box 458
Halifax, NS B3J 3J9
Attention: FOI Officer
Telephone: (902) 424-7768

Northwest Territories

Government of the Northwest Territories
P.O. Box 1320
Yellowknife, NWT X1A 2L9
Attention: Deputy Registrar of Securities
Telephone: (867) 920-8984

Nunavut

Legal Registries Division
Department of Justice
Government of Nunavut
P.O. Box 1000 Station 570
Iqaluit, NU X0A 0H0
Attention: Deputy Registrar of Securities
Telephone: (867) 975-6190

Ontario

Ontario Securities Commission
Suite 1903, Box 55
20 Queen Street West
Toronto, ON M5H 3S8
Attention: FOI Coordinator
Telephone: (416) 593-8314

Prince Edward Island

Securities Registry
Office of the Attorney General B Consumer, Corporate and
Insurance Services Division
P.O. Box 2000
Charlottetown, PE C1A 7N8
Attention: Deputy Registrar of Securities
Telephone: (902) 368-4569

Québec

Autorité des marchés financiers
Stock Exchange Tower
P.O. Box 246, 22nd Floor
800 Victoria Square
Montréal, PQ H4Z 1G3
Attention: Responsable de l'accès à l'information
Telephone: (514) 395-0337 or (877) 525-0337 (in Québec)

Saskatchewan

Saskatchewan Financial Services Commission
800 B1920 Broad Street
Regina, SK S4P 3V7
Attention: Director
Telephone: (306) 787-5842

Yukon

Department of Community Services Yukon
P.O. Box 2703
Whitehorse, YU Y1A 2C6
Attention: Registrar of Securities
Telephone: (867) 667-5225

**FORM 33-109F6
APPLICATION FOR REGISTRATION AS A DEALER, ADVISER OR
INVESTMENT FUND MANAGER FOR SECURITIES AND/OR DERIVATIVES**

[PAPER VERSION]

Complete this form to apply for the firm's initial registration in any province or territory of Canada. If you are unable to answer the question fully on the form, attach additional details as a schedule using a separate sheet of paper, clearly identifying the relevant section and item.

Please complete and sign the form, and send it to the appropriate Canadian securities regulator(s) in each Canadian jurisdiction where the firm is applying for registration. Make sure to include the required attachments, including all schedules, and have them initialed and dated by a senior officer of the applicant firm.

A. Contact information

1. Legal name of the applicant firm
2. Other than the legal name of the applicant firm provided in Item A.1, please list the names the applicant firm will be "carrying on business as" and any trade names the applicant firm operates under.
Please provide effective date of trade names and the end date if applicable.
3. List all the previous names ever used by the applicant firm, and all previous names used by any of its affiliates or predecessors within the last 10 years

4. Address

Head office address

Telephone number

Fax number

E-mail address

Website (If not applicable to your firm, indicate N/A)

Mailing address (if different from head office address)

If the Head office is not in Canada, does the applicant firm have a place of business in Canada?

Yes No

If yes, provide the mailing address.

5. Key contact person for the applicant firm (This is the primary person with whom the regulators will address all matters relating to the application and ongoing requirements. This person may be external legal counsel to the applicant firm.)

Name Telephone number

Firm Name (if not applicant firm name)

Title E-mail address

6. Address for service in home jurisdiction

If address for service is the same address as the head office address, check this box

7. Who is responsible for the applicant firm's compliance in the Canadian jurisdiction(s) where the firm is applying for registration (e.g. Ultimate Designated Person and Chief Compliance Officer)? If it is the same person as indicated in question 5, state this.

Name:	NRD #:
Title:	E-mail address:
Telephone number:	Province or territory:

Name:	NRD #:
Title:	E-mail address:
Telephone number:	Province or territory:

8. Who is the Chief Authorized Firm Representative for the National Registration Database (NRD)?

Name E-mail address

Telephone number

B. Jurisdictions where firm is applying

- | | |
|-------------------------|--------------------------|
| Alberta | <input type="checkbox"/> |
| British Columbia | <input type="checkbox"/> |
| Manitoba | <input type="checkbox"/> |
| New Brunswick | <input type="checkbox"/> |
| Newfoundland & Labrador | <input type="checkbox"/> |
| Northwest Territories | <input type="checkbox"/> |
| Nova Scotia | <input type="checkbox"/> |
| Nunavut | <input type="checkbox"/> |
| Ontario | <input type="checkbox"/> |
| Prince Edward Island | <input type="checkbox"/> |
| Quebec | <input type="checkbox"/> |
| Saskatchewan | <input type="checkbox"/> |
| Yukon | <input type="checkbox"/> |

C. Categories of registration

1. What type of registration is the firm applying for? (Check all that apply.)

- | | |
|--------------------------------|--------------------------|
| Investment dealer | <input type="checkbox"/> |
| Mutual fund dealer | <input type="checkbox"/> |
| Scholarship plan dealer | <input type="checkbox"/> |
| Exempt market dealer | <input type="checkbox"/> |
| Restricted Dealer | <input type="checkbox"/> |
| Investment fund manager | <input type="checkbox"/> |

Portfolio Manager

Restricted Portfolio Manager

D. Business structure and history

1. Type of legal structure (e.g. corporation, partnership, sole proprietor)
2. Where are the majority of the senior officers located?
3. Provide a brief history of the applicant firm and any affiliates, i.e. nature of the applicant firm's business and how long it has been in business.
4. Has the applicant firm amalgamated with, acquired or been acquired by another entity within the last 10 years?

Yes No

If yes, provide names of entities, relevant dates, and type of transaction.

5. List all owners of the applicant firm that, directly or indirectly, exercise control over 10 per cent or more of the voting securities of the firm.

Name	Date of birth (if applicable)	Title (if applicable)	E-mail address	Security ownership (class, type and amount)

6. List all of the principals of the applicant firm. (If they are the same as above, state this.)

Name	Title	E-mail address

7. List below all the permitted individuals as defined in Regulation 33-109, and file a Form 33-109F4 for each of these permitted individuals via NRD

Name	Title	Date of Birth

Please attach the following documents:

8. A business plan for the next five years that includes:

- the nature of services, including types of securities and/or derivatives to be distributed or discretionary or non-discretionary advice provided

In this form, “derivatives” means financial instruments, such as futures contracts, options and swaps whose market price, value or payment obligations are derived from or based on one or more underlying interests. Derivatives can be in the form of instruments, agreements or securities.

- proposed or existing investment models for your portfolios, sectors and types of securities in models, research to be conducted, etc.

- products the applicant firm intends to develop, manage or administer and how they will be distributed

- the applicant firm’s intentions about providing any financial services, such as lending or margining

- target client market (e.g. individuals, accredited investors, retail clients, types of institutions, etc.)

- details of relationships and any arrangements or contracts, relating to the financial services being provided, with other persons

- how assets of clients will be held

- fees charged to clients (e.g. commissions, percentage of profits, transaction fees, pre-paid fees)

- details of outsourcing arrangements, such as names of entities involved, dates, and relationship with those entities.

- list of products that will be sold under an exemption and which exemptions the applicant firm intends to rely on

- number of representatives and branches anticipated

- plans for non-securities business activities requiring a license

- plans for non-securities business that is not subject to licensing or registration

9. Organizational chart showing the applicant firm's reporting structure. This must include directors, senior officers/partners, ultimate responsible person and chief compliance officer.

10. Ownership chart showing all controlling owners and affiliates

11. Copy of the articles of incorporation or any other constating document. If the applicant firm is a partnership or sole proprietor, provide a copy of the partnership agreement or registration of trade name.

E. Capital requirements

1. If the applicant firm is less than five years old, where did the applicant firm's start-up capital come from and what was the amount?

2. For assets of the applicant firm held by a financial institution, provide the following:

Name and address of financial institution	Description of asset	Amounts (\$)

3. Are any people acting as guarantor for the applicant firm?

Yes No

If yes and the guarantor has an NRD number, please provide this number:

If yes, provide the names, address, telephone number and email address of the guarantor(s).

If yes, disclose any influence the guarantor(s) may have over the applicant firm and any potential for conflict of interest the firm may have with the individual(s) acting as guarantor(s), and describe how the applicant firm will minimize the potential for conflict of interest.

4. Does the applicant firm currently have any executed subordination agreements in relation to any loans from an associate owing by the firm?

Yes No

If yes, provide a copy of each agreement.

Please attach the following documents:

5. Calculation of excess working capital form (for non SRO members use Form 31-103F1; for SRO members use the appropriate capital calculation form required to be filed by the IDA/MFDA)

6. Audited financial statements (opening balance sheet if the applicant firm is a start-up company)

F. Financial information

1. Fiscal year end (MM/DD)
(If the applicant firm does not have a definite date for its year end, state this and provide details.)

2. Firm's auditor

3. Insurance (for securities-related activities in all jurisdictions)

Name of insurer	Specific insuring agreements	Policy #
-----------------	------------------------------	----------

Amount of coverage \$	Amount of the deductible \$	Renewal date
-----------------------	-----------------------------	--------------

List jurisdictions where insurance is held

If the applicant firm's insurance coverage is not in the form of a Financial Institution Bond, provide details demonstrating that the insurance coverage is equivalent to this bond.

Does the applicant firm's insurance cover all jurisdictions where it is applying for registration?

Yes No N/A

If No or N/A, explain why

4. Has the applicant firm or any of its affiliates ever been declared bankrupt or made an assignment in bankruptcy?

Yes No

If yes, provide details about how and when it happened, whether it was voluntary or involuntary, and the jurisdiction.

5. Has the applicant firm or any of its affiliates ever appointed a receiver or receiver manager, or had one appointed?

Yes No

If yes, provide details, the date and the jurisdiction.

6. In the last ten years, has the applicant firm ever,

been denied bonding?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
made a claim on a bond?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
had a bond revoked?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

If yes, provide details of the bond, the date and the jurisdiction and the reasons for the denial, payout or revocation.

7. Has the applicant firm made any claims to its insurance company during the last ten years for any securities-related activity?

Yes No

If yes, provide amount of the claim, the date and the jurisdiction.

8. Provide the name and address of each bank where the applicant firm's accounts are held

Name

Address

Please attach the following documents:

9. Letter of direction authorizing the auditor to conduct an audit of the applicant firm that the regulator may request at any time while the firm is registered. The letter must state that firm will pay for the costs of the audit and will provide the regulator with a copy of the report if requested.

10. Directors' resolution on sufficiency of insurance for the securities-related activities

G. Operations

1. Does the applicant firm have any conflicts of interest related to securities or financial dealings of clients? For example, relationships with other registrants, referral arrangements with other registrants, or any affiliates registered in the same category for which the applicant is seeking registration.

Yes No

If yes, provide details.

2. Does the applicant firm take possession or intend to take possession of client funds and/or securities?

Yes No

Please attach the following documents:

3. Policies and procedures manual
4. Relationship disclosure document
5. Written policy on fairness in allocation of investment opportunities (advisers only)
6. Copy of the applicant firm's letterhead and a sample business card
7. Proposed marketing material to be distributed by the firm

8. Copy of the firm's standard employment agreement between registered individuals and the firm specifically identifying the compensation arrangement
9. Copy of the applicant firm's Know Your Client form and/or client account opening forms
10. Where applicable, client-related documents, such as financial plans, investment policy statement and investment management agreements

H. Registration, licensing and memberships (financial services-related)

1. Is the applicant firm or any of its affiliates currently registered or have they ever been registered in any province, territory, state or country to deal or advise in securities or derivatives?

Yes No

If yes, list the jurisdiction(s), categories of registration, date registered and expiry date of registration, if applicable.

2. Is the applicant firm a member of a securities and/or commodities exchange, a self-regulatory organization (SRO) or similar organization in any province, territory, state or country?

Yes No

If yes, list the organization(s) and jurisdiction(s).

If no, has the applicant firm applied for registration or membership with a securities and/or commodities exchange, an SRO or similar organization?

Yes No

If yes, list the organization(s) and jurisdiction(s).

3. Is the applicant firm or any of its affiliates currently registered or have they ever been registered in any province, territory, state or country under legislation that requires licensing or registration to sell or advise in financial products other than securities (e.g. mortgage broker, financial planning, life insurance, derivatives, etc.)?

Yes No

If yes, list the type of license or registration, jurisdiction, date registered and expiry date of registration, if applicable.

4. Does the firm currently have clients in the jurisdiction where the firm is applying for registration?

Yes No

If yes, please provide details.

5. Has the applicant firm or any of its affiliates or predecessors ever entered into a settlement agreement with any financial services regulator or with any organizations referred to in question 2 above?

Yes No

If yes, please provide details.

6. Has any financial services regulator or any of the organizations referred to in question 2 ever:

	Yes	No
(a) Determined that the applicant firm or any of its affiliates or predecessors made a false statement or omission	<input type="checkbox"/>	<input type="checkbox"/>
(b) Determined that the applicant firm or any of its affiliates or predecessors violated regulations or laws of any province, territory, state or country, or violated the rules of an SRO or commodities exchange	<input type="checkbox"/>	<input type="checkbox"/>
(c) Determined that the applicant firm or any of its affiliates or predecessors is not suitable for registration, licensing or membership	<input type="checkbox"/>	<input type="checkbox"/>
(d) Refused the applicant firm or any of its affiliates or predecessors registration, licensing or membership in any province, territory, state or country for securities-related activities or in any other capacity?	<input type="checkbox"/>	<input type="checkbox"/>
(e) Suspended or terminated any registration, licensing or membership of the applicant firm or any of its affiliates or predecessors	<input type="checkbox"/>	<input type="checkbox"/>
(f) Appointed a monitor for the applicant firm or any of its affiliates or predecessors	<input type="checkbox"/>	<input type="checkbox"/>
(g) Issued an order to the applicant firm or any of its affiliates or predecessors about investment-related activity (e.g. cease trade order)	<input type="checkbox"/>	<input type="checkbox"/>

(h) Denied the applicant firm or any of its affiliates or predecessors any exemption from registration, licensing or membership in any province, territory, state or country

(i) Imposed conditions on any registration or membership of the applicant firm or any of its affiliates or predecessors

If yes to any of the above items, provide full details, including the regulator/organization, jurisdiction and the date.

7. Within the last 10 years has the applicant firm ever been:

Yes **No**

(a) Subject to an order, a proceeding or the initiation of a proceeding by a financial services regulator, securities and/or commodities exchange or SRO, or similar organization of which it is a member

(b) Sanctioned by a financial services regulator, securities and/or commodities exchange or SRO, or organization of which it is a member

If yes to any of the above items, describe the proceeding or sanction, the regulator, SRO or organization and the relevant date(s).

8. Is the applicant firm currently involved in a situation that would reasonably be expected to result in a YES answer to any of the items in question 6 or 7 in this section?

Yes No

If yes, describe the situation.

I. Legal action

1. Has the applicant firm or any of its affiliates ever been convicted under the laws of any province, territory, state or country?

Yes No

If yes, describe the type of conviction, the date of the conviction and the jurisdiction.

2. Is the applicant firm or any of its affiliates currently the subject of any outstanding charges or indictments under the laws of any province, territory, state or country?

Yes No

If yes, describe the charges or indictments and the jurisdiction.

3. Are there currently any outstanding civil actions against the applicant firm or its affiliates?

Yes No

If yes, describe the nature of the action, the current stage of the litigation and the specific remedies requested by the plaintiff(s)

4. Has the applicant firm or any of its affiliates ever received a judgement of fraud or theft against it in a civil court, criminal court or administrative tribunal in any jurisdiction in the world?

Yes No

If yes, describe the case, the date it took place and the jurisdiction.

5. Are there any judgements or liens against the applicant firm or any of its affiliates?

Yes No

If yes, describe the judgements or liens, the date and the jurisdiction.

J. National Registration System

1. Election to use the national registration system (NRS)

Has the applicant firm elected to use the NRS?

Yes No

If yes, by submitting this form, the applicant firm:

- certifies that in each Canadian jurisdiction where it has appointed an agent for service, it has completed the appointment of agent for service required in that jurisdiction
- is subject to the securities and/or derivatives legislation of each Canadian jurisdiction where it has applied for registration, including the jurisdiction of any tribunals or any proceedings that relate to the registrant's activities under that securities and/or derivatives legislation

- waives any right to use lack of jurisdiction as a defence in any of those tribunals or proceedings.

Please attach the following documents:

- A completed Form 31-101F1
- Cheque payable to each of the regulators where the applicant firm is seeking registration
- Confirmation that insurance covers all jurisdictions where applying for registration

K. Collection of personal information

Securities regulators require personal information about the people listed on this form so they can complete their review of this application, and if the firm is approved, to assess whether the firm continues to meet the registration requirements.

Securities regulators may collect this information only under the requirements in securities and/or derivatives legislation and may only use personal information to administer and enforce provisions of the securities and/or derivatives legislation. Securities regulators may collect personal information from this application, police records, records of other regulators or self-regulatory organizations, credit records, employment records, government and private bodies or agencies, individuals, corporations, and other organizations. They may also collect personal information indirectly.

Securities regulators may also provide personal information about the individuals listed on this form to other regulators, SROs or similar organizations or stock exchanges if required for an investigation or other regulatory issue.

If any one listed on this form has any questions about the collection and use of their personal information, they can contact the securities regulator in the relevant jurisdiction. See Schedule A for details. In Québec, they can also contact the Commission d'accès à l'information du Québec at 1-888-528-7741 or visit its website at www.cai.gouv.qc.ca.

By completing this section, you:

- Acknowledge that the securities regulator in the relevant jurisdiction(s) may collect personal information about the individuals listed on this form and to provide it to any regulator, SRO or similar organization or stock exchange if required for an investigation or other regulatory issue.
- confirm that the individuals listed on this form have been notified that their personal information is disclosed on this form, the legal reason for doing so, how it will be used and who to contact for more information.

Name of authorized signing officer

Title of authorized signing officer

Signature

Date signed (YYYY/MM/DD)

L. Submission to jurisdiction and appointment of agent for service of process
(Those firms that are considered to be non-resident firms must complete this section for each jurisdiction where they are applying for registration.)

By submitting this form, the applicant firm:

- is subject to the securities and/or derivatives legislation of each Canadian jurisdiction where you have submitted this form, including the jurisdiction of any tribunals or any proceedings that relate to your activities as a registrant under that securities and/or derivatives legislation;
- appoints the agent at the address below to be served any documents for any of these tribunals or proceedings;

Name of the applicant firm

Jurisdiction where the applicant firm was incorporated

Agent Contact Information:

Name of agent for service of process (agent)

Address of agent in jurisdiction(s) where firm is applying for registration

Firm Name (if applicable)

Telephone Number

Fax number

E-mail address

The applicant firm agrees to file a new submission to jurisdiction and appointment of agent for service of process if any of the following changes occur within six years of the termination of the firm's registration:

- the name or address of the agent for service changes
- the firm changes its agent for service.

The new submission for jurisdiction and appointment for agent for service of process must be filed at least 30 days before the change comes into effect.

This submission to jurisdiction and appointment of agent for service of process is governed by the securities and/or derivatives legislation of the relevant jurisdiction in Canada.

Firm's authorization

Name of applicant firm's authorized signing officer

Title of applicant firm's authorized signing officer

Signature

Date signed (YYYY/MM/DD)

Agent's authorization

By signing below, you agree to act as agent for service of process for the applicant firm according to the terms set out in this submission to jurisdiction and appointment of agent for service of process.

Name of agent's authorized signing officer

Title of agent's authorized signing officer

Signature

Date signed (YYYY/MM/DD)

Please attach the following:

1. The firm's privacy statement for collection and disclosure of personal information
2. The firm's executed consent to collection of personal information

M. Signatures

By signing below, you confirm that:

- you have read and understand the questions in this form
- you understand that it is an offence under the securities and/or derivatives legislation to provide false or misleading information on this form
- all of the information provided on this form is true.

Name of applicant firm

Name of authorized signing officer

Title of authorized signing officer

Signature

Date signed (YYYY/MM/DD)

Witnessed by a lawyer, notary public or commissioner of oaths:

Name

Title

Signature

(indicate in which capacity witness has signed, i.e. lawyer, notary public or commissioner of oaths)

Date signed (YYYY/MM/DD)

SCHEDULE A

Who to contact if you have questions about the collection and use of your personal information.

Alberta

Alberta Securities Commission,
4th Floor, 300 B 5th Avenue S.W.
Calgary, AB T2P 3C4
Attention: Information Officer
Telephone: (403) 297-6454

British Columbia

British Columbia Securities Commission
P.O. Box 10142, Pacific Centre
701 West Georgia Street
Vancouver, BC V7Y 1L2
Attention: Freedom of Information Analyst
Telephone: (604) 899-6500 or (800) 373-6393 (in BC)

Manitoba

The Manitoba Securities Commission
500-400 St. Mary Avenue
Winnipeg, MB R3C 4K5
Attention: Director – Legal
Telephone: (204) 945-0605

New Brunswick

New Brunswick Securities Commission
Suite 300, 85 Charlotte Street
Saint John, NB E2L 2J2
Attention: Director, Market Regulation
Telephone: (506) 658-3021

Newfoundland and Labrador

Securities Commission of Newfoundland and Labrador
P.O. Box 8700, 2nd Floor, West Block
Confederation Building
St. John's, NF A1B 4J6
Attention: Director of Securities
Tel: (709) 729-4189

Nova Scotia

Nova Scotia Securities Commission
2nd Floor, Joseph Howe Building
1690 Hollis Street
P.O. Box 458
Halifax, NS B3J 3J9
Attention: FOI Officer
Telephone: (902) 424-7768

Northwest Territories

Government of the Northwest Territories
P.O. Box 1320
Yellowknife, NWT X1A 2L9
Attention: Deputy Registrar of Securities
Telephone: (867) 920-8984

Nunavut

Legal Registries Division
Department of Justice
Government of Nunavut
P.O. Box 1000 Station 570
Iqaluit, NU X0A 0H0
Attention: Deputy Registrar of Securities
Telephone: (867) 975-6190

Ontario

Ontario Securities Commission
Suite 1903, Box 55
20 Queen Street West
Toronto, ON M5H 3S8
Attention: FOI Coordinator
Telephone: (416) 593-8314

Prince Edward Island

Securities Registry
Office of the Attorney General B Consumer, Corporate and
Insurance Services Division
P.O. Box 2000
Charlottetown, PE C1A 7N8
Attention: Deputy Registrar of Securities
Telephone: (902) 368-4569

Québec

Autorité des marchés financiers
Stock Exchange Tower
P.O. Box 246, 22nd Floor
800 Victoria Square
Montréal, PQ H4Z 1G3
Attention: Responsable de l'accès à l'information
Telephone: (514) 395-0337 or (877) 525-0337 (in Québec)

Saskatchewan

Saskatchewan Financial Services Commission
800 B1920 Broad Street
Regina, SK S4P 3V7
Attention: Director
Telephone: (306) 787-5842

Yukon

Department of Community Services Yukon
P.O. Box 2703
Whitehorse, YU Y1A 2C6
Attention: Registrar of Securities
Telephone: (867) 667-5225