



DEPOSIT REQUEST AND PAD AGREEMENT (OTHER THAN RESP) INDIVIDUAL SAVINGS AND RETIREMENT

F51-153A-1

Agency code, Advisor code, S.U., Advisor, Advisor's telephone number, Extension, Contract no., Annuitant's first and last name (in block letters), Fundserv contract (Dealer code, Intermediary code)

A DEPOSIT OF A SUBSEQUENT PREMIUM
One-time pre-authorized debit (Complete section J on page 3.)
Cheque from the client: \$ (Minimum \$100) (Complete section C.)
Transfer from another institution: \$ (Complete section C.)
Loan reimbursement: \$

B CHANGE TO AUTOMATIC INVESTMENT TERM (AIT) - (ATTENTION: PAD AGREEMENT AVAILABLE ON PAGE 3 (SECTION J))
IMPORTANT The Daily Interest Fund+ (DIF+) and the Guaranteed Interest Fund (GIF) are not offered under Fundserv contracts.
Modify the AIT of the DIF+
Modify the GIF maturity instruction: Y Y Y Y M M D D
Keep investments in the DIF+
Investment maturing on
Other instructions (Complete section C.)
All GIF investments
Capital and Interest (Complete section C.)
Interest only (Complete section C.)
Capital only (Complete section C.)

C INVESTMENT INSTRUCTIONS
High Interest Savings Account: % or \$
Daily Interest Fund+ (DIF+): % or \$
If there is an AIT on the contract, the amounts deposited in the DIF+ will be invested according to the AIT when the required minimum has been reached.
Investment Funds: % or \$
(Complete the table opposite.)
(ATTENTION: Minimum \$5 per fund)
Guaranteed Interest Fund: % or \$
To guarantee the interest rate, form F50-238A Interest Rate Guarantee Agreement is required.
GIF (For AIT): \$500 (par default) or \$1,000
Please use table F13-1000A for the investment fund numbers.
The total cash amount or percentage must equal 100% of the premium to be invested.
Table with 4 columns: Fund no., If FEL, % of premiums, % or \$, Order no.

D SPECIAL INSTRUCTIONS

E DECLARATIONS/SIGNATURES
By signing below, I request that the transactions indicated in this request be carried out in accordance with the stipulations of the Contract and, if applicable, confirm I have read and agree to the information and provisions of the PAD Agreement.
If Fund units are credited to this contract for the first time: I confirm that I have completed electronic investor profile no. (to be included) or a paper profile (to be included) with my advisor and I acknowledge receipt of the Information Folder which describes the characteristics of my contract as well as the Fund Facts booklet.

Date Applicant Co-Applicant Advisor\*/Witness

\* Where there is a deposit of a subsequent lump-sum premium of \$100,000 or more for a non-registered annuity contract, I, the life insurance agent, confirm that I have taken reasonable measures to determine if the owner(s), and the individual making the payment (if he or she is not an owner), are politically exposed persons or heads of an international organization or a family member or close associate of either; and I have taken reasonable measures to establish the source of the funds. I also confirm that if there is a deposit of a subsequent lump-sum premium of \$100,000 or more and this request is made using the paper format, that I have completed a new form F51-208A and it is attached to this deposit request.





DEPOSIT REQUEST AND PAD AGREEMENT (OTHER THAN RESP) INDIVIDUAL SAVINGS AND RETIREMENT

F51-153A-1

Agency code, Advisor code, S.U., Advisor, Trade made by Fundserv network: Check here, Trade made by Extranet/Web: Check here, Advisor's telephone number, Extension

Grid for Agency code, Advisor code, S.U., Advisor, Advisor's telephone number, Extension

Contract no., Annuitant's first and last name (in block letters), Fundserv contract

Grid for Contract no., Annuitant's first and last name, Fundserv contract

F RESETS

Table with 2 columns: VERSION, RESET. Rows include Ecoflex (guarantee 1), Ecoflex (guarantees 5, 13, 15, 16 and 19), Ecoflex (guarantees 6, 12, 17 and 18), IAG SRP Ecoflex Series 100/100, IAG SRP Series 75/100 and Series 75/100 (Prestige), IAG SRP FORLIFE Series (guarantee 31).

G CHANGE OF MATURITY DATE FOR THE GUARANTEE

Table with 2 columns: VERSION, CHANGE OF MATURITY DATE. Rows include Ecoflex (guarantee 1), Ecoflex (guarantees 5, 13, 15, 16 and 19), Ecoflex (guarantees 6, 12, 17 and 18), IAG SRP Ecoflex Series 100/100, IAG SRP Series 75/100 and Series 75/100 (Prestige), IAG SRP FORLIFE Series (guarantee 31).

Y Y Y Y M M D D

Enter the new guarantee maturity date:

H SPECIAL INSTRUCTIONS

I DECLARATIONS/SIGNATURES

- By signing below, I request that the transactions indicated in this request be carried out in accordance with the stipulations of the Contract and, if applicable, confirm I have read and agree to the information and provisions of the PAD Agreement.
If Fund units are credited to this contract for the first time: I confirm that I have completed electronic investor profile no. (to be included) or a paper profile (to be included) with my advisor and I acknowledge receipt of the Information Folder which describes the characteristics of my contract as well as the Fund Facts booklet.

Date X Applicant X Co-Applicant X Advisor\*/Witness

\* Where there is a deposit of a subsequent lump-sum premium of \$100,000 or more for a non-registered annuity contract, I, the life insurance agent, confirm that I have taken reasonable measures to determine if the owner(s), and the individual making the payment (if he or she is not an owner), are politically exposed persons or heads of an international organization or a family member or close associate of either; and I have taken reasonable measures to establish the source of the funds. I also confirm that if there is a deposit of a subsequent lump-sum premium of \$100,000 or more and this request is made using the paper format, that I have completed a new form F51-208A and it is attached to this deposit request.





**Pre-Authorized Debit (PAD) Agreement**

In this PAD Agreement each owner is referred to as "I" and makes the following statements in respect to himself or herself:

- I authorize Industrial Alliance Insurance and Financial Services Inc. ("iA Financial Group") and the financial institution designated (or any other institution I may authorize at any time) to begin deductions as per my instructions for regular recurring payments and/or one-time payments from time to time for payment of all premiums, deposits, installments and charges arising from the Contract mentioned herein;
- Regular payments will be debited on the date and at the frequency I have chosen, whereas one-time payments from time to time can be debited from my account on any other date. Regular and/or one-time payments will be debited in accordance with the banking information set out in the Electronic Application;
- I agree that, for the purpose of this PAD Agreement, all PADs from my account will be treated as Personal or Business\* depending on the choice I have made on the Electronic Application;
- **I waive the right to receive pre-notification of an increase or decrease in the amount to be debited or a change in the date and/or frequency of these payments;**
- I agree that iA Financial Group is not required to provide me with written notice of a change in a PAD amount that is made as a result of my request;
- If a PAD is dishonoured for any reason such as, but not limited to, insufficient funds ("NSF") or stop payment, iA Financial Group is authorized to resubmit the payment. **Any charges incurred by iA Financial Group as a result of a dishonoured PAD will be added to the subsequent PAD;**
- I may cancel or change this PAD Agreement at any time, subject to providing iA Financial Group thirty (30) days notice in writing. To obtain a sample cancellation form or for more information on my right to cancel the PAD Agreement, I may contact my financial institution or visit [www.payments.ca](http://www.payments.ca) regarding Rule H1 – Pre-authorized debits (PADs);
- Any cancellation of this PAD Agreement will not affect my insurance contract(s) and/or contract(s) for financial services, so long as payment is provided by an alternate method;
- iA Financial Group will not assign this PAD agreement without providing me the full details of the assignment a minimum of ten (10) days in advance of any PAD being issued in the assignee's name;
- I have certain recourse rights if any PAD does not comply with this PAD Agreement. For example, I have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit [www.payments.ca](http://www.payments.ca) regarding Rule H1 - Pre-authorized debits (PADs);
- Before iA Financial Group debits the first PAD payment, it must receive all required documents, duly completed and be allowed a reasonable period of time to complete its administrative processes.

\*Business PAD means a PAD for the payment of goods or services related to a business or commercial activity of the payor.

**Telephone number: 1-844-4iA-INFO (1-844-442-4636) Information: [savings@ia.ca](mailto:savings@ia.ca)**

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