



**FOR HEAD OFFICE USE ONLY. ACTION: BUY WITH EFT SETTLEMENT**

By completing and signing this one-time PAD Agreement, the Payor(s) named below agrees that:

- RBC Life Insurance Company (RBC Life) is authorized to make a one-time withdrawal in the amount of \$ \_\_\_\_\_ to pay the lump sum deposit according to your investment instructions as indicated on your deposit request for  
 new account \_\_\_\_\_  existing account \_\_\_\_\_.
- By signing this Agreement, you give RBC Life permission to debit the account held at the financial institution indicated below.

**Bank Information**

Please attach a SPECIMEN personalized blank cheque marked "Void" (a line of credit account cannot be used).

Name of Bank or Financial Institution	Transit Number	Bank Number	Account Number
Address			
City	Province	Postal Code	

**You agree that:**

- The one-time PAD will be withdrawn on the day it is received by RBC Life or when all requirements for your deposit request have been received in good order. RBC Life is not required to provide notification before the requested deposit amount is debited and assumes funds are available as of the date this one-time PAD is received. The Payor(s) agree to waive any pre-notification requirements that may apply to any debit. This means the parties accept that notice will not be provided before the due date of any PAD.
- This Agreement is for a single transaction only for the amount indicated above and will terminate upon the one-time PAD being withdrawn from the account above. This Agreement does not provide authorization for any additional unrelated debits to your account. Any additional debits will require that you execute an additional PAD Agreement. This Agreement may be cancelled upon notice being provided by Payor(s), either in writing or orally with proper authorization to verify the identity of the person, within 30 days before the PAD is to be issued. In order to cancel this Agreement, you must provide notice at the address or phone number below.
- The financial institution indicated above is authorized to honour this request made by RBC Life to withdraw from the account indicated above. If your payment is returned to us marked NSF (non-sufficient funds), we reserve the right under our Administrative Rules to charge a fee to you in addition to the amount indicated above.
- In the event that this one-time PAD Agreement is disputed, the Payor(s) agrees to contact RBC Life. For recourse purposes, this one-time PAD Agreement is considered a Personal PAD.
- The Payor(s) has certain recourse rights if any debits do not comply with this Agreement. For example, the Payor(s) has 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 recourse rights, the Payor(s) may contact their financial institution or visit [www.cdnmpay.ca](http://www.cdnmpay.ca).
- The names and signatures of all persons required to authorize withdrawals from the account indicated are included below.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_  
 (City/Province) (Month/Year)

Print name of Payor (account holder)	Print name of Second Payor (account holder) (if any)
Signature of Payor	Signature of Second Payor (if any)