

# Client Information Change Form



## PART 1: ACCOUNT INFORMATION

### Plan Type

RRSP/LRSP/LIRA    RRIF/LIF/LRIF    TFSA    RLSP    RLIF    RDSP

Account # \_\_\_\_\_

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

## PART 2: CLIENT ADDRESS

Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Business Phone \_\_\_\_\_

City \_\_\_\_\_

Province \_\_\_\_\_

Postal Code \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

## PART 3: AGENT INFORMATION

I hereby appoint the following agent named within and direct and authorize Community Trust Company ("CTC") to release and provide all or any information concerning my registered account to my agent. I further authorize CTC to accept instructions from my agent, signed by me, with respect to the acquisition or disposition of any investment held for my Plan and authorize CTC to make all required deposits and withdrawals from the plan for the purpose of carrying out such instructions.

Agent Name \_\_\_\_\_

Company \_\_\_\_\_

Email \_\_\_\_\_

Telephone Number \_\_\_\_\_

License/Agent Number \_\_\_\_\_

Remove the Agent currently on file for the account.

## PART 4: RIF/LIF PAYMENT

Payment Frequency:  Monthly    Quarterly    Semi-annually    Annually

Payment Amount:  Minimum (per ITA)    Specified Amount \$ \_\_\_\_\_ (cannot exceed LIF Maximum amount)    LIF Maximum

Payment Date: \_\_\_\_\_  
(MM/DD)

Payment Instructions: Direct Deposit to my bank account \_\_\_\_\_  
Bank    Transit Number    Account Number (attach "VOID" cheque)

## PART 5: BANKING INFORMATION

Bank \_\_\_\_\_    Transit Number \_\_\_\_\_    Account Number (attach "VOID" cheque)

## PART 6: SIGNATURE

I hereby authorize CTC to make the above stated changes.

I consent to having CTC use the email address that I have supplied herein to communicate with me regarding the status and on-going administration of my Plan.

I expressly request that this document and any related instruments be drawn up in the English language. Je demande expressément que la présente formule et tous les documents qui s'y rapportent soient rédigés en anglais.

Client Signature \_\_\_\_\_

Date \_\_\_\_\_

## PRIVACY

### Privacy Statement

Community Trust Company is committed to protecting the personal information of our clients. Personal information obtained in the course of doing business with you is not collected, used or disclosed except in compliance with governing legislation, including Canada's Personal Information Protection and Electronic Documents Act (PIPEDA).