



Corporate Resolution Authorizing Purchase and Sale of Securities

Resolution of the Board of Directors of

_____ Company Name

RESOLVED:

1. That the Company open and operate one or more accounts with Credential Direct® (a division of Credential Securities Inc.), and that the following Officer(s) of the Company: the _____, the _____, the _____, and the _____ are hereby [select one¹:] jointly severally authorized and empowered

to purchase coins, securities of whatsoever nature or kind, (hereinafter collectively called "securities") on margin or otherwise; to sell, assign, pledge, transfer, hypothecate or otherwise dispose of any securities held by Credential Direct for the Company whether or not registered in the name of the Company; to make, execute and sign, as Credential Direct may require, all necessary agreements, documents, acts of assignment, pledges, transfers and hypothecations of said securities; and to sign drafts or receipts for money or securities and verify and settle accounts between the Company and Credential Direct.

2. That all transactions for the Company's account(s) are to be effected and controlled with respect to settlement and all other matters pursuant to the terms and conditions of Credential Direct agreement(s) governing such account(s), which agreement(s) have been duly executed and are ratified and confirmed and are numbered as follows:

Account Number(s): _____

3. That any and all transactions for the Company's account(s) and any documents in connection therewith heretofore or hereafter executed by the said Officer(s) on behalf of the Company are hereby ratified and confirmed;
4. That all acts and things done and documents executed on behalf of the Company, as hereinbefore authorized, may be relied upon by Credential Direct and shall be valid and binding upon the Company whether or not the corporate seal of the Company has been affixed to any such document;
5. That this resolution shall remain in full force and effect until a copy, certified by the Secretary of the Company whether or not under the seal of the Company, of a resolution repealing or replacing this resolution shall have been received by Credential Direct; and
6. That the Secretary shall advise Credential Direct of all changes of persons holding the Office(s) listed in paragraph 1 hereof.
7. The parties hereto have requested that this agreement be drawn up in the English language only. *Les parties aux présentes ont demandé que cette convention soit rédigée en anglais uniquement.*

CERTIFIED to be a true copy of a Resolution duly passed by the Board of Directors of

_____ at a properly constituted meeting duly held on the _____ day of _____, 20____, which Resolution is now in full force and effect and un-amended.

SIGNED and DATED at _____ in the Province of _____ this _____ day of _____, 20____.

(Authorized Signatory)

¹ Indicates whether the account or accounts must be operated by any (severally) or all (jointly) authorized signing officers. If neither word is selected the accounts or accounts may be operated for all purposes by any authorized signing officer, and Credential Securities shall be fully protected in acting thereon.



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Suitability Waiver

By marking the boxes under the heading "Suitability Waiver" below, you acknowledge that Credential Direct and its Registered Representatives will not give you investment advice or recommendations and will not be responsible for the determination of your general investment needs and objectives regarding the purchase or sale of any security. You acknowledge that Credential Direct and its Registered Representatives do not accept any responsibility to advise you on the suitability of any of your investment decisions or transactions. You acknowledge that you alone are responsible for the financial impact of your investment decisions. You understand that orders entered by you may be sent directly to the exchange or market without prior review by Credential Direct. You acknowledge your obligation to comply with the requirements regarding entry and trading of orders on the exchanges and markets where your orders are executed. However, Credential Direct reserves the right to review any of your transactions prior to entry on the exchange or market. You acknowledge that Credential Direct has the right to reject, change or remove any order entered by you or to cancel any trade resulting from an order entered by you. Without this consent Credential Direct will not be able to open this account.

Designated Officer(s) of the Company referred to in (1) above.

Name	Position	Signature	Suitability Waiver
Officer #1 ²		X	<input type="checkbox"/> I Acknowledge
Officer #2 ²		X	<input type="checkbox"/> I Acknowledge
Officer #3 ²		X	<input type="checkbox"/> I Acknowledge
Officer #4 ²		X	<input type="checkbox"/> I Acknowledge

² **Important Note:** All Designated Officer(s) indicated above **must** complete a *KYC Supplemental Form* and provide acceptable identification.

I hereby certify that the above is a list of the officer(s) authorized pursuant to the above resolution of

_____ with a specimen of their respective signatures.

SIGNED and DATED at _____ in the Province of _____ this ____ day of _____, 20____.

Authorized Signatory Signature

If more than one KYC Supplemental Form is being completed for the account, this is page _____ of _____.

Account Holder Information:

Investor Name _____ Account Number _____

Complete this form if you are a: (Select ALL that apply to the above listed account)

- beneficial owner of more than 10% of a corporation, partnership, sole proprietorship, foundation, investment club, estate, association, charitable organization or similar entity
- beneficial owner/beneficiary of a formal or informal trust
- trustee and/or settlor of a formal or informal trust
- executor/trix of an estate account
- person who is the Attorney of a General Power of Attorney to an account
- person with trading authority to a personal account
- person designated as trading officer with a corporation, partnership, sole proprietorship, foundation, investment club, estate, association, charitable organization or similar entity.

Supplemental Person/Entity Information

First Name		Middle Name		Last Name	
Legal Entity Name			Entity Type of Business		Business Number
Beneficial Ownership %					
Apt/Suite	Street Address			City	Province
Postal Code	Country	Residential Phone		Alternative Phone	
Relationship to Account Holder			Date of Birth (dd/mmm/yyyy)		Citizenship ¹
Employer Name			Occupation		

¹Note: If U.S., complete IRS W-9 form

Identification: ID Type: _____ Issuer: _____ ID #: _____

U.S Tax Status Self Certification:

Are you a U.S. resident for U.S. tax purposes or a U.S. citizen? No Yes *If "yes" please provide the U.S. tax identification number in the SSN field, if applicable and complete a W9 to determine whether the account will be subject to U.S. withholding taxes.*

Are you or a family member living in your household considered a Professional (PRO) working in the Securities Industry?

No Yes *If Yes, Please provide a letter of authorization completed by the securities professional's employer and complete the following:*

Name of PRO: _____ Employer: _____ Occupation: _____

Investment Information

Investment Experience (Tick all that Apply): Stocks Bonds Mutual Funds Options Commodities/Futures None

Investment Knowledge (Select One): Sophisticated Good/Average Limited Poor/Nil

Insider or Control Person Are you considered an "Insider" or "Control Person" of any public companies listed on a Canadian or U.S. exchange? No Yes, complete table below

Company Name	Ticker Symbol	Market	Insider/Director/Officer	Control Person	Insider Reporting
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Supplemental Person/Entity Authorization

By signing below, you hereby declare that the information provided above is full, true and complete. You also acknowledge that you have reviewed a copy of the Credential Direct Account Agreements and Disclosure Document booklet (available online) and agree to the terms therein. Credential Direct may rely on the information you have provided until you send us written notice of any changes.

X
Supplemental Person/Entity Signature _____ Date (dd/mmm/yyyy) _____ Existing Account # of Supplemental Person (if applicable) _____

How to Complete the Know-Your-Client Supplemental Form

The *Know Your Client* principle applies to all the individuals' names on the NAAF and any other individuals having control over or financial interest in the account. As such, full disclosure must be made of all persons that have trading authorization or beneficial/financial ownership on an account to satisfy KYC requirements. Use this form as supplemental information to accompany the New Account Application Form.

Account Holder Information

Enter the Account Holder Name and Account # of the account for which Supplemental Person/Entity Information is being added.

Supplemental Person/Entity Information

Legal Entity – enter the Legal Entity Name (and Business Number, if applicable) if the KYC Supplemental is being completed by an entity rather than an individual. In addition, entry fields such as *Investment Experience* and *Investment Knowledge* should be completed based on the 'entity' rather than an individual. Legal Entities may also be required to complete additional IRS Tax Treaty Documents.

Beneficial Ownership % – for beneficial owners, indicate the percentage of ownership you maintain.

Identification

Enter the identification information and attach a photocopy of a valid, original Driver's License, Passport or Permanent Resident Card.

Insider or Control Person

Regulations require Credential Direct to know if the Individual is considered an "Insider" or "Control Person" of a publicly traded company on any Canadian or US exchange.

Insider: an "Insider" is:

- An officer, director or promoter of a publicly traded Canadian or US company, and/or
- A person with direct or indirect beneficial ownership of, control or direction over (or combination thereof) 10% or more of the voting rights attached to the securities of a publicly traded company listed in Canada (5% or more for a publicly listed company in the U.S.)

Control: a "control person" holds or exercises control or direction over, or has any agreement, arrangement, commitment or understanding (whether or not in writing) individually or with any other persons with respect to 20% or more of the voting rights attached to the securities of a publicly traded company listed in Canada (10% or more for a publicly listed company in the U.S.)

Existing Account # of Supplemental Person – If the Supplemental Person/Entity has an account with Credential Direct, enter the account number.