

Electronic Funds Transfer (EFT) is an optional service designed for clients who wish to deposit or withdraw cash between their Credential Direct account and their financial institution account.

**NOTE: To update your Banking Information only, please fill out the *Investor Information, Banking and Authorization* sections.**

The following conditions apply to this service:

- You must provide us with either a VOID cheque or a Bank Confirmation Letter from your financial institution.
- We will not transfer cash electronically to or from third parties.
- Your financial institution must be situated in Canada.
- Neither PADs nor SWDs (see below) may not be used for business purposes (i.e. bill payments).
- If the financial institution account is a joint account that requires two signatures, then both individuals must sign this form.

**Investor Information**

Investor Name \_\_\_\_\_ Joint Investor Name \_\_\_\_\_ Account Group # (e.g. 2J1234) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

**Transaction Types**

- Administration Fee** – Transfer cash from your financial institution account for payment of the administration or other fees.
- Funds Transfer Authorized Contribution (PAC)<sup>1</sup>** – Transfer cash from your financial institution account to your Credential Direct account. This service is not available for LIRA/LRSP/RRIF/LRIF/LIF/PRIF accounts.  
<sup>1</sup> **Note:** If Spousal RSP, process as:  Individual  Spousal/Common-Law Partner Contribution
- Systematic Withdrawal (SWD)** – Transfer cash from your Credential Direct account to your financial institution account. This service is not available for Registered Accounts other than TFSAs.

Account Type	Action <sup>2</sup>	Amount	Frequency <sup>3</sup>	Effective Date (dd/mmm/yyyy)	End Date (if applicable) (dd/mmm/yyyy)

<sup>2</sup> **Action:** Start, Cancel, Change

<sup>3</sup> **Frequency:** One Time Only, Weekly, Bi-Weekly, Semi-Monthly, Monthly, Quarterly, Semi-Annually, Annually.

- Banking information currently on file** NOTE: If more than one account on file, please specify: \_\_\_\_\_

**Banking Information** (Select one)

- New<sup>4</sup>
- Change<sup>4</sup> <sup>4</sup> Please Attach a VOID Cheque or a Credential Direct Account Confirmation Letter (attached).
- Canadian Dollar Account  U.S. Dollar Account

If this is a joint bank account, have the joint account holder sign here<sup>5</sup> **X** \_\_\_\_\_  
<sup>5</sup> This is for instances where the joint bank account holder is different from the Joint Investor.

**Additional Notes:** \_\_\_\_\_

**Investor Authorization**

**I/We hereby authorize Credential Direct to conduct the Electronic Funds Transfer(s) as indicated above. I/We have read the terms and conditions contained on the Credential Direct Electronic Funds Transfer Authorization Form and agree that such terms and conditions are binding on me/us.**

**X** \_\_\_\_\_ **X** \_\_\_\_\_ \_\_\_\_\_  
Investor Signature Joint Investor Signature Date (dd/mmm/yyyy)

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**Electronic Funds Transfer (EFT) Terms & Conditions**

In this Agreement,

- "you", "your" means "Credential Direct".
  - "me", "my", "I", means the "Customer".
  - "Annual Fee" means the yearly account administration fee in place from time to time for Brokerage Accounts, details of which can be found in the Credential Direct Service Fee Schedule.
  - "Processing Institution" means the financial institution that holds the Account to be credited/debited by means of Electronic Funds Transfer.
  - "Processing Institution Account" means my Account at the financial institution.
  - "Brokerage Account" means my Account with Credential Direct.
- a) I acknowledge that all my financial transactions will be handled by your Electronic Funds Transfer service. The Processing Institution Account that Credential Direct is authorized to deposit or draw upon has been specified by me on the Credential Direct Electronic Funds Transfer Authorization Form. A specimen cheque has been marked "VOID" and attached to the Credential Direct Electronic Funds Transfer Authorization Form.
- b) I acknowledge that this authorization is provided for the benefit of Credential Direct and the Processing Institution and is provided in consideration of the Processing Institution agreeing to process credits or debits for or against, respectively, my Processing Institution Account in accordance with the Rules of the Canadian Payments Association.
- c) This authorization is continuing and Credential Direct may rely on this authorization for all financial transactions relating to my Brokerage Account(s) and/or my Processing Institution Account(s), until I notify Credential Direct of any changes in accordance with section (f) below.
- d) I warrant and guarantee that all persons whose signatures are required to sign on my Processing Institution Account(s) have provided their signature(s) on the Credential Direct *Electronic Funds Transfer Authorization Form*.
- e) I hereby authorize Credential Direct to deposit or draw on the Processing Institution Account, for the following purposes:
- i. Depositing credit balances from my Credential Direct Brokerage Account(s) upon my instructions;
  - ii. Debiting my Processing Institution Account in accordance with Page 1 of the Credential Direct Electronic Funds Transfer Authorization Form.
- f) I may change or revoke this authorization at any time upon providing ten (10) business days written notice to Credential Direct. In the case of a change or revocation that impacts the debiting of my Annual Fee, written notice must be received by Credential Direct not later than November 20 of the year in which the Annual Fee is to be debited. Sample cancellation forms or further information on your rights to cancel any pre-authorized debits can be obtained from my Processing Institution or by visiting [www.cdnpay.ca](http://www.cdnpay.ca).
- g) I acknowledge that Credential Direct has the right to terminate my authorization, if through no fault of your own, you are unable to debit the Processing Institution Account(s) in the full amount that I have specified.
- h) I acknowledge that provisions and delivery of this authorization to Credential Direct constitutes delivery by me to the Processing Institution.
- i) I acknowledge that I am responsible for ensuring that there are sufficient funds available in my Brokerage Account and/or my Processing Institution Account to cover any transfers. I am responsible for all service fees that may arise in connection with my Processing Institution Account.
- j) I undertake to inform Credential Direct, in writing, of any changes in the Processing Institution Account information provided in this authorization prior to requesting any transactions with respect to my Processing Institution Account.
- k) I acknowledge that the Processing Institution is not required to verify that a deposit or debit has been issued in accordance with the particulars of my authorization including, but not limited to, the amount and frequency of deposits or payments.
- l) I acknowledge that the Processing Institution is not required to verify that any purpose of payment for which the debit was issued has been fulfilled by Credential Direct as a condition to honouring a debit issued or caused to be issued by me on my Processing Institution Account.
- m) Revocation of this authorization does not terminate any contract for goods or services that exists between me and Credential Direct. My authorization applies only to the method of payment and does not otherwise have any bearing on the contract for the goods or services exchanged.
- n) I have waived my right to receive pre-notification of the amount of each pre-authorized debit authorized by the Credential Direct Electronic Transfer Authorization and agree that I do not require advance notice of the amount of the pre-authorized debits before the debit is processed.
- o) I have certain recourse rights if any debit does not comply with the Credential Direct Electronic Funds Transfer Authorization Form. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this document. To obtain more information on my recourse rights, I may contact my Processing Institution or visit [www.cdnpay.ca](http://www.cdnpay.ca)
- p) If the funds in my Processing Institution Account are insufficient to cover any debit authorized by the Credential Direct Electronic Funds Transfer Authorization Form, Credential Securities may assess the NSF fee in effect at that time, as outlined in the Credential Direct Service Fee Schedule. In the case of insufficient funds, the NSF fee and the failed debit will be withdrawn from my Brokerage Account.

# Account Confirmation Letter

## Account Information

Fax to: 1.877.742.2901 or 604.742.2901

### To Credential Direct:

1. Please accept this as confirmation that the following Chequing or Savings Account Number information belongs to the specified individual(s), or Corporation (or non-personal entity) as indicated:

Transit Number

Institution Number

Account Number (refer to micro encoding on the cheque)

Account Holder Name (Print Name)

Joint Account Holder Name (Print Name)

Residential / Corporate Address

### 2. Account requirements and status (Complete information as indicated)

- a) Account is enabled for Electronic Funds Transfer (EFT)\* (chequing privileges)  Yes  No  
\* NOTE: Not applicable for TFSA or Registered accounts.
- b) Account Denomination  Cdn Dollars  US Dollar
- c) Account Type  Personal  Corporate  Other \_\_\_\_\_
- d) Account Signature Requirements  1 Signature  2 Signatures
- e) Account Standing:  Yes  No  
The client(s) is known to the branch and is in good standing. If "No", please specify reason: \_\_\_\_\_

## Branch Authorization

Branch Representative Name (Print Name)

Title

Contact Phone

X

Branch Representative Signature

Date (dd/mmm/yyyy)

Branch Stamp:

## Completing this Form

1. The account being confirmed must be enabled for EFT purposes and cannot be a credit card, Line of Credit account, TFSA or Registered account.
2. Complete the information on this Account Confirmation Letter, and
3. Provide a Branch Stamp to satisfy Anti-Money Laundering Legislation and/or to establish an Electronic Funds Transfer (EFT) link.
4. Submit the completed Account Confirmation Letter form to Credential Direct by either:
  - Faxing a copy to: 604.742.2901 or 1.877.742.2901
  - or
  - Including the form with the Credential Direct New Account Application form.