

FORM 2

ATTESTATION(S) REGARDING SPOUSE/COMMON-LAW PARTNER

1. To: Computershare Trust Company of Canada and \_\_\_\_\_  
(insert name of agent)

2. List of applicable federally regulated locked-in plans: (Please identify any locked-in registered retirement savings plan, life income fund, restricted locked-in savings plan or restricted life income fund that is held by the financial institution identified above and from which you intend to withdraw or transfer funds.)

- (a) \_\_\_\_\_
(b) \_\_\_\_\_
(c) \_\_\_\_\_

3. Attestation of applicant

I, \_\_\_\_\_ (insert name of Annuitant), of \_\_\_\_\_ (insert address),
in the city of \_\_\_\_\_, in the province of \_\_\_\_\_, attest to the following:

I own the federally regulated locked-in plan(s) identified in item 2. I intend to withdraw or transfer

\$ \_\_\_\_\_ from the plan(s). On the day on which I sign this Attestation (check one):

- (a) \_\_\_\_\_ I do not have a spouse or common-law partner, as defined in section 2 of the Pension Benefits Standards Act, 1985;
(b) \_\_\_\_\_ I have a spouse or common-law partner, as defined in section 2 of the Pension Benefits Standards Act, 1985, and my spouse or common-law partner consents to the withdrawal of the amount specified above from the locked-in plan(s) identified in item 2. (If you check this box, your spouse or common-law partner must complete the Attestation of Spouse or Common-law Partner, in item 6 below.)

4. Acknowledgements

I understand that when funds are withdrawn or transferred from any federally regulated locked-in plan, the funds may lose the creditor protection provided by the Pension Benefits Standards Act, 1985 and the Pension Benefits Standards Regulations, 1985.

I understand that when funds are withdrawn or transferred from any federally regulated locked-in plan, the funds may be taxable under the Income Tax Act or other legislation.

I understand that I may need to seek professional advice about the financial and legal implications of such a withdrawal or transfer.

5. Signatures

Sworn before me, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ at \_\_\_\_\_,

in the province of \_\_\_\_\_.

Signature of applicant \_\_\_\_\_

\_\_\_\_\_
A notary public, commissioner or other person authorized to take affidavits

**6. Attestation of Spouse or Common-law Partner**

I, \_\_\_\_\_ (insert name of Spouse), of \_\_\_\_\_ (insert address),

in the city of \_\_\_\_\_, in the province of \_\_\_\_\_, attest to the following:

I am the spouse or common-law partner of the owner of the locked-in plan(s) identified in item 2.

I understand that

(a) the applicant intends to withdraw or transfer funds from the federally regulated locked-in plans identified in item 2, which withdrawal or transfer is not permitted under the *Pension Benefits Standards Act, 1985* unless the applicant obtains my consent;

(b) as long as these funds are kept in that federally regulated locked-in plan, I may have a right to a share of these funds if there is a breakdown in our relationship or if the owner dies;

(c) if any funds are withdrawn or transferred from that federally regulated locked-in plan, I may lose any right that I have to a share of the funds withdrawn or transferred;

(d) when funds are withdrawn or transferred from any federally regulated locked-in plan the funds may lose the creditor protection provided by the *Pension Benefits Standards Act, 1985* and the *Pension Benefits Standards Regulations, 1985*;

(e) when funds are withdrawn or transferred from any federally regulated locked-in plan the funds may be taxable under the *Income Tax Act* or other legislation; and

(f) I may need to seek professional advice about the financial and legal implications of such a withdrawal or transfer.

**7. Consent of Spouse or Common-law Partner**

I consent to the withdrawal or transfer specified in item 3.

**8. Signatures**

Sworn before me, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ at \_\_\_\_\_,

in the province of \_\_\_\_\_.

**Signature of spouse or common-law partner** \_\_\_\_\_

\_\_\_\_\_

A notary public, commissioner or other person authorized to take affidavits