

Welcome to BMO InvestorLine **BMO INVESTORLINE CO-APPLICANT ACCOUNT INFORMATION**

You are completing this form as a joint investment account. With the exception of accounts operating in the Province of Quebec, all BMO InvestorLine joint accounts are Joint With Rights of Survivorship. Please refer to the Client Agreements for details.

**A TELL US ABOUT THE CO-APPLICANT for investment accounts only**

Please note it will take us longer to process your paper requests. For a quicker turnaround, we recommend completing online forms. You can access online account applications at [bmo.com/self-directed](http://bmo.com/self-directed)

Citizenship  Country of Residence

U.S. persons will need to complete a W-9 form. Please contact BMO InvestorLine or visit our web site for this form.

Title  Last Name  First Name

Please enter your name exactly as it appears on your government-issued photo ID.

Home Address (no., street) if different from applicant

Suite No.  City or Town  Prov.  Postal Code

Primary Phone (area code, no.)  Secondary Phone (area code, no.)  Ext.

Email  Marital Status

Mailing Address if different from above

Suite No.  City or Town  Prov.

Postal Code  Date of Birth (YY/MM/DD)  Relationship to Applicant

Residency for Tax purposes (Check all that apply)

- Canada (You must be a resident of Canada to open a BMO InvestorLine account) Social Insurance Number  (required by Canada Revenue Agency if you are using a SIN starting with a 9 please submit a photocopy of your SIN card showing a valid expiry date.)
- U.S. Tax Identification Number  (please provide a reason if Tax Identification Number is missing)
- Other (please specify) Tax Identification Number  (please provide a reason if Tax Identification Number is missing)
- Other (please specify) Tax Identification Number  (please provide a reason if Tax Identification Number is missing)

Reasons for missing Tax Identification Number (TIN):

- 1. I have applied for a TIN but have not yet received one.
- 2. My jurisdiction of tax residence does not issue TINs to its residents.
- 3. Other (please provide details)

Employment Status  Full-time (30 hours or more per week)  Part-time (Less than 30 hours per week)  Self employed  Unemployed  Retired (Please provide your last: occupation, employer's name, industry, city and prov.)  Casual/Contract  Seasonal

Occupation

Employer Name  Industry

Employer's Address (number, street)  Suite No.

City or Town  Prov.  Postal Code

Employer's Phone Number

Are you, or any member of your immediate family, currently fulfilling, or have fulfilled, a Politically Exposed Person (PEP) position? Examples of PEP roles (list is not exhaustive): Government official, a high-ranked military officer, employed by an Embassy, the head of a government agency, president of a state-owned company or bank, a judge or a leader of a political party?

No  Yes (if yes, please complete the following information)  Domestic  Foreign / International Organization

Position / Title

**B CO-APPLICANT'S spouse or common-law partner**

Please omit this section if the Co-applicant's spouse or common-law partner is the Applicant.

Title  Last Name  First Name

Occupation

Employer Name  Industry

**C FINANCIAL information**

Please round to the nearest dollar.

Please provide your BMO Banking Information (if applicable).

Annual Income from all sources \_\_\_\_\_

BMO Transit Number \_\_\_\_\_ BMO Account Number \_\_\_\_\_

Net Liquid Assets (A)  
(Cash & Securities less loans outstanding against securities) \_\_\_\_\_

BMO Bank Address \_\_\_\_\_

Net Fixed Assets (B)  
(Fixed assets less liabilities outstanding against fixed assets) \_\_\_\_\_

Address Continued \_\_\_\_\_

Estimated Net Worth (C)  
(C=A+B) \_\_\_\_\_

Source of Annual Income  Employment income  Retirement income  Student loans/bursaries or RESP  Inheritance  Real estate investment  Unemployment benefits  Social assistance  Investment in securities  Alimony (spousal support)  Other \_\_\_\_\_

Funding Your Account  Saving of employment income  Investment in securities  Real estate investment  Gifts  Other \_\_\_\_\_

Intended use of the Account  Short Term Investment  Retirement Savings  Long Term Investment  Education Savings  Income Generation  Estate Planning  Savings  Other \_\_\_\_\_

**D FOR OPTIONS account applications**

**CO-APPLICANT'S INFORMATION**

- Number of years trading in options: \_\_\_\_\_
- How would you describe your options trading knowledge?  Expert  Knowledgeable  Limited  None
- Experience with:  None  Long Calls or Puts  Covered  Spreads  Naked

I have received the Risk Disclosure Statement for Futures and Options (Section Four, Part G of the Client Agreement). I understand the special risks pertaining to trading in options and that BMO InvestorLine Inc. is not registered to trade in futures. I declare that I have adequate financial resources to sustain any such transaction in which I participate.

Co-applicant's Signature \_\_\_\_\_ Date YY/MM/DD

**E PLEASE PROVIDE DETAILS if you answer YES to the following questions**

**CO-APPLICANT'S INFORMATION**

- Are you, or your spouse/common-law partner:
  - An insider, director or senior officer (i.e. an officer or one of the five highest paid employees) of a publicly traded (exchange or over-the-counter) company or affiliate of such a company? Or Individually, or as part of a group, own more than 10% of the voting rights attached to all voting securities?  
 Yes  No Company Name(s): \_\_\_\_\_
  - If yes, are you a Reporting Insider under Canadian securities legislation?  
 Yes  No Company Name(s): \_\_\_\_\_
  - Separately or in combination with other persons, a holder of more than 20% of the outstanding voting securities of a publicly traded (exchange or over-the-counter) company or affiliate of such a company?  
 Yes  No Company Name(s): \_\_\_\_\_
  - Individually, or as part of a group, a member with controlling interest in a publicly traded (exchange or over-the-counter) company or affiliate of such a company?  
 Yes  No Company Name(s): \_\_\_\_\_
- Do you have, or exercise authority over, any brokerage accounts with other financial institutions?  
 Yes Financial institution(s): \_\_\_\_\_  
 No Account Type: \_\_\_\_\_ Account Type: \_\_\_\_\_
- Do you have, or exercise authority over, any accounts with BMO InvestorLine?  
 Yes  No Account #1: \_\_\_\_\_ Account #2: \_\_\_\_\_
- Will any other person have authority over, or any financial interest in, your account(s)? If another person will have authority over your account(s), please complete our "Authorized Trading Agent or Power of Attorney" form  
 Yes  No Name: \_\_\_\_\_
- Will anyone other than yourself use or direct transactions in this account? *This excludes those authorized to give instructions about the account, i.e., Joint Account Holder, Trading Agent, Power of Attorney and Trustee.*  
 Yes If yes, please complete the "Third Party Information" form. Please contact BMO InvestorLine for this form.  
 No

## F SIGNATURE FOR ALL ACCOUNTS

### NATIONAL INSTRUMENT 54-101 – SHAREHOLDER COMMUNICATION INFORMATION

We are required under securities law to obtain your instructions concerning the various matters below relating to your holding of securities in your account.

#### Part 1 – Disclosure of Beneficial Ownership Information

#### Part 2 – Receiving Securityholder Materials

#### Part 3 – Preferred Language of Communication

#### Part 4 – Consent to Electronic Delivery

Please read the National Instrument 54-101, Communication with Beneficial Owners of Securities of a Reporting Issuer, in Section Four, Part C of the Client Agreements. Please discuss your options with the other beneficial owner(s) on the account(s) and provide your instructions on the Account Application Form.

Co-applicant's  
Signature \_\_\_\_\_

Date  
YY/MM/DD 

Y	Y	M	M	D	D
---	---	---	---	---	---

### ORDER EXECUTION ONLY ACCOUNT ACKNOWLEDGEMENT

I acknowledge that BMO InvestorLine Inc. does not give personal or client specific or tailored investment advice or recommendations to me and does not accept any responsibility to advise me on the suitability of any of my investment decisions or transactions. I acknowledge that I am responsible for any investment decisions as well as for any profits or losses that may result. I further acknowledge that it is my obligation to comply with the requirements of the Toronto Stock Exchange respecting entry and trading of orders and that BMO InvestorLine Inc. reserves the right to reject, change or remove any order which I may enter or to cancel any trade resulting from an order which I entered which is not in compliance with the requirements of the Toronto Stock Exchange.

Co-applicant's  
Signature \_\_\_\_\_

Date  
YY/MM/DD 

Y	Y	M	M	D	D
---	---	---	---	---	---

### CARRYING BROKER INFORMATION

I acknowledge that I have been advised that BMO InvestorLine Inc. is an Introducing Broker and BMO Nesbitt Burns Inc. is a Carrying Broker for my account. BMO InvestorLine Inc. is responsible for all compliance requirements for my account. For accounting and regulatory purposes, I am considered a client of BMO Nesbitt Burns Inc. BMO Nesbitt Burns Inc. is responsible for trade execution and settlement, custody of securities and the preparation of confirmations and account statements. Client cash balances in non-registered accounts are held by BMO Bank of Montreal, and client cash balances in registered accounts are held by BMO Trust Company.

### PROTECTION OF YOUR PRIVACY (Arrangements will be based on the Applicant's instructions.)

We are committed to protecting all of the personal information you share with us in order to maintain your privacy. It is our top priority to respect and uphold your need for confidentiality. The information we gather is used to verify your identity and protect you and BMO InvestorLine against fraud, to set up and manage products and services you have requested and to satisfy the regulatory obligations of our industry.

You agree that, at the time you begin a relationship with us and during the course of our relationship, we may collect, use and disclose your information for the purpose of, but not limited to, the requirement to: identify you, provide ongoing service, understand your financial needs, protect us both from fraud and error, comply with legal and regulatory requirements, and market products and services to you.

By signing below, I acknowledge that from time to time, BMO InvestorLine may send me information, including direct marketing messages, in order to better understand my needs and make me aware of appropriate products and services. I am also aware that my SIN may be used for administrative and tax reporting purposes.

I may change my preferences stated on the Account Application at any time by contacting BMO InvestorLine. The servicing of my account as per this agreement is in no way conditional or dependent on my preferences. I acknowledge that I cannot opt out of sharing my personal information where I have requested a product or service that is offered jointly by BMO InvestorLine and another member of BMO Financial Group.

Co-applicant's  
Signature \_\_\_\_\_

Date  
YY/MM/DD 

Y	Y	M	M	D	D
---	---	---	---	---	---

### SHARED PREMISES DISCLOSURE

I/we acknowledge that, for my/our securities transactions, I/we am/will be dealing with BMO InvestorLine Inc., a Member of the Investment Industry Regulatory Organization of Canada (IIROC) and Member of the Canadian Investor Protection Fund (CIPF).

BMO InvestorLine Inc. may share office space with the following separate but affiliated entities:

- Bank of Montreal offering banking and financial services.
- BMO Investments Inc., a subsidiary of Bank of Montreal Holding Inc., offering mutual fund products by registered mutual fund representatives, and in Quebec, by registered financial planners.
- BMO Nesbitt Burns Inc., a wholly owned subsidiary of BMO Bank of Montreal offering full service advisory services.
- Nesbitt Burns Securities Limited, a wholly owned subsidiary of BMO Nesbitt Burns Inc., offering services to US residents as a US registered Broker-Dealer and Investment Adviser.
- BMO Estate Insurance Advisory Services Inc., a wholly owned subsidiary of BMO Nesbitt Burns offering insurance products by licensed life insurance agents, and in Quebec, by financial security advisors.
- BMO Private Investment Counsel Inc., a wholly owned subsidiary of BMO Nesbitt Burns Inc., offering trading and advising in securities and derivatives by registered individuals.
- BMO Trust Company, a wholly owned subsidiary of Bank of Montreal, offering estate, trust, planning and custodial services.

I/we acknowledge that I/we have read and understood the disclosure, and that I/we understand that these are shared premises.

Co-applicant's  
Signature \_\_\_\_\_

Date  
YY/MM/DD 

Y	Y	M	M	D	D
---	---	---	---	---	---

### PERSONAL AND CREDIT INFORMATION AUTHORIZATION

I/We authorize BMO InvestorLine to obtain personal and credit information from a credit reporting company and within BMO Financial Group to verify my identity and prevent theft or fraud.

Co-applicant's  
Signature \_\_\_\_\_

Date  
YY/MM/DD 

Y	Y	M	M	D	D
---	---	---	---	---	---

## G SIGNATURE for all investment accounts

By requesting the opening of a either a cash investment account, or an account granted margin facility, I/we certify that the information in this application is true and complete and I have received and agree to the terms and conditions as outlined in the Customer Agreement ([https://www.bmoinvestorline.com/ApplyNow/forms/Cust\\_Agr.pdf](https://www.bmoinvestorline.com/ApplyNow/forms/Cust_Agr.pdf)) booklet. In addition, I/we certify that I/we have disclosed all of my/our citizenships and residencies for tax purposes. I/We also agree to advise you immediately in writing of any material change in information.

Co-applicant's  
Signature \_\_\_\_\_

Date  
YY/MM/DD 

Y	Y	M	M	D	D
---	---	---	---	---	---

## H SIGNATURE for margin accounts only

I/We hereby apply to be granted a margin facility with respect to the account(s) selected in this application as being a "Margin Account". I/We certify that: i) I am capable of evaluating and bearing the financial risks inherent in borrowing on and use of margin to finance the buying of securities; and (ii) I/We understand and agree to the terms and conditions governing the use of Margin.

Co-applicant's  
Signature \_\_\_\_\_

Date  
YY/MM/DD 

Y	Y	M	M	D	D
---	---	---	---	---	---

Please provide a verified photocopy of 1 piece of Federal, Provincial or Territorial government issued photo ID.