



# New Account Application/Additional Investment

## CIBC Securities Inc.

MF Acct. No. 51810138	Date 2 9 0 4 2 0 1 9	Time 17:53:11	Dealer No. 9319	Transit No. 0 0 7 8 7	MF Rep. No. 39730	Wire Order No.	CAR Code No. 25	Order Transmitted By <input type="checkbox"/> telephone <input type="checkbox"/> fax
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In this application, for non-registered accounts, *Spouse* means your spouse, common-law partner or civil union partner. For registered accounts, *Spouse* has the meaning defined in the applicable Declaration of Trust. *Agreement* means the CIBC Mutual Funds Account Agreement and Disclosures Booklet. CIBC acceptable I.D. includes valid passport, valid driver's licence or Canadian citizenship card.

### 1. Account Information

New Account  Existing Purpose of Account (non-registered accounts only) \_\_\_\_\_

(Non-registered accounts only) Is this account being opened on behalf of, or for the benefit of, any Third Party?  Yes  No  
A "Third Party" includes any individual or non-personal entity other than the accountholder(s) who has a beneficial interest in the account and/or who has direct or indirect control over the use of the Account. If the account is to be used exclusively by and for the benefit of the accountholder(s), please check "No" above". If "Yes" is checked above, please provide information about third parties with indirect control in section 10, information about beneficial owners of an informal trust in section 4, information about third parties with trading authority in section 13, and information about beneficial owners in the supplementary form for Trust/Estate, Corporate or Association accounts, as applicable.

Non-Registered ..  Individual  Joint  Trust/Estate  Corporate  Association  Other \_\_\_\_\_

RSP .....  Individual  Spousal  Locked-in RSP/LIRA (attach locked-in amending agreement)

RIF .....  Individual  Spousal

For all locked-in accounts, please note jurisdiction: \_\_\_\_\_

### 2. Customer/Annuitant Information (ALL ACCOUNTS)

Business Legal Name (if applicable, for non-registered/non-personal accounts only)

Business Trade Name	Start Date M M M D D Y Y Y Y	Date of Incorporation M M M D D Y Y Y Y
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Place of Issue	Business Number (if applicable)	Nature of Business
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Contact Name for Corporation or applicant information for Personal Accounts

<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr.	Last Name O'FLAHERTY	First Name & Middle Name(s) EDWARD
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#### Customer Identification (Provide two pieces of CIBC acceptable I.D. noting Place of Issue, in addition to Financial Institution Information)

Driver's Licence No. O30321925981215	Other (Specify) Social Insurance Number card - 524936796	Other (Specify)	Name of Financial Institution CIBC
Place of Issue Ontario	Place of Issue ONTARIO	Place of Issue	Financial Institution Transit and Account No. 00787 AND 7263139

Residential Address  
621 BEACH RD PO BOX 695

City KEEWATIN	Province ONTARIO	Country Canada	Postal Code POX 1C0
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Mailing Address (if different from Residential address)

City	Province	Country Canada	Postal Code	Date of Birth D e c 1 5 1 9 9 8
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Social Insurance Number 5 2 4 9 3 6 7 9 6	No. of Dependents 0	e-mail Address (Optional) 621BEACHRD@GMAIL.COM	Language Preference <input checked="" type="checkbox"/> English <input type="checkbox"/> French
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Home Phone Number ( 807 ) 547-2445	Business Phone Number / Ext. ( )	<input checked="" type="checkbox"/> CIBC Customer <input type="checkbox"/> CIBC Premier Service <input type="checkbox"/> CIBC Staff
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Investment Knowledge:  Minimal  Basic  Moderate  Well Developed  Extensive

### 3. Joint Applicant Information (NON-REGISTERED ACCOUNTS ONLY: Review the Agreement; if more than one joint applicant, complete Section 3 using a new Form 8284)