PI FINANCIAL

PI Financial Corp.
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ACCOUNT NUMBERS

0 | | | | | | |
0 | | | | | | |
0 | | | | | | |

IA # | | | |

Client # | | | | | | |

New account ❑
Change of IA ❑
Change to existing account ❑

Client Information

To be completed in conjunction with Client Agreement Form & Shareholder Communication Form

Information Required by Securities Regulators

Account Holder MR. MISS MRS. MS. DR. | Social Insurance Number | Date of Birth MM DD YR / /

Residential Address

City | Province | Postal Code

Country of Residence | Citizenship | E-mail Address

Employer Name | Occupation

Employer Address | City | Province | Postal Code

Res Phone # ( ) | Bus Phone # ( ) | Fax # ( ) | Cell/Pager # ( )

Do you want statements/confirmations sent to your: (please circle one)
Residence Business Duplicate (attach instructions)

If residential address is a P.O. Box, please provide street address:

Name of Co-Account Holder (please complete Personal Information Form) | Marital Status | Spouse's Name

Spouse's Employer | Spouse's Occupation | Number of Dependents

EST NET LIQUID ASSETS A___________
(Cash and securities less loans outstanding against securities)
PLUS

EST NET FIXED ASSETS B___________
(Fixed assets less liabilities outstanding against fixed assets)
EQUALS

EST TOTAL NET WORTH (A+B=C) C___________

APPROX. ANNUAL INCOME FROM ALL SOURCES D___________

INVESTMENT KNOWLEDGE *(circle one)*

Sophisticated Good Limited Minimal

INVESTMENT EXPERIENCE *(in years)*

	# of years		*# of years*
Equities	(____)	Short Sales	(____)
Bonds	(____)	Options	(____)
Mutual Funds	(____)	None	
Commodities	(____)		
Others	(____)	____________ *please specify*	

ACCOUNT OBJECTIVES AND RISK FACTORS

Income ___________ %
CAPITAL GAINS
Short term ___________ %
Medium term ___________ % = 100 %
Long term ___________ %

Low _________ %
Medium _________ % = 100 %
High _________ %

Are RRSP/RRIF/TFSA objectives the same? ❑ Yes ❑ N/A ❑ No—attach details

Are you an Officer or Director or Insider of a publicly traded issuer?
❑ No ❑ Yes - please specify:

Do you singularly or as part of a group control more than 20% of the votes of a publicly traded issuer?
❑ No ❑ Yes - please specify:

Are you related to a PI Financial employee?
❑ No ❑ Yes - state name and relationship:

Do you reside at the same address as a PI Financial employee?
❑ No ❑ Yes - state name and relationship:

Are you, or do you reside with an employee or principal of a member of any stock exchange, or of a stock exchange itself?
❑ No ❑ Yes - state name and relationship:

Does anyone other than the account, or co-account holder have any authority over, or any financial interest in this account?
❑ No ❑ Yes - attach Trading Authorization Form

Have you authorized any PI Financial employee to use discretion in handling your account?
❑ No ❑ Yes - attach Discretionary Agreement Form

Is this a Nominee account?
❑ No ❑ Yes - attach Nominee Account Form

How did you learn about PI Financial? ❑ Personal contact ❑ Advertising/direct mail ❑ Phone in ❑ Walk in
❑ Website ❑ Referral - please state name or account number:

Do you have any other PI Financial accounts?
❑ No ❑ Yes - please provide account number:

Do you have accounts at other investment firms?
❑ No ❑ Yes - What type of account? ❑ Cash ❑ RRSP ❑ Other Please specify which firm:

Have you ever been the subject of a sanction, or penalty, in any securities-related or fraud-related, criminal, regulatory, or civil matter? ❑ No ❑ Yes - please provide details

Are you currently the subject of any investigation in any securities-related or fraud-related, criminal, regulatory, or civil matter?
❑ No ❑ Yes - please provide details

Are you a Politically Exposed Foreign Person?
❑ No ❑ Yes

BANK INFORMATION

Attach a void cheque or complete below

Bank Name: ___________________________

Address: ___________________________

____

Account #: ___________________________

TYPE OF ACCOUNT REQUESTED

Check all that apply

	Cdn$	**US$**	**Please Attach**
Cash	❑	❑	N/A
Margin	❑	❑	Margin Agreement
Short	❑	❑	Margin Agreement
DAP	❑	❑	Include Settlement Instructions
RRSP	❑	N/A	RRSP Application
RRIF	❑	N/A	RRIF Application
TFSA	❑	❑	TFSA Application
Pro	❑	❑	N/A
Discretionary	❑	❑	Discretionary Agreement
Joint	❑	❑	PIF/Joint Tenants

I certify that the information provided by me on this form is true and complete, and I agree to advise PI Financial Corp. (PI) immediately of any inaccuracies or changes. I agree to the terms and conditions set out in any Client Account Agreement relating to my account or accounts. I also agree to the terms and conditions of PI's Privacy Policy as amended from time to time and consent to the collection and use of my personal information as set out in the Privacy Policy. In particular, I authorize PI to obtain such credit and other financial information, as well as public information regarding me as is permitted by law. Should I so wish, or be it deemed to be necessary of PI, I hereby apply for a margin facility with respect to my account or accounts.

MM DD YR
____/____/____ ______________________________ ______________________________
Date **Signature of Account Holder** **Signature of Co-Account Holder**

FOR OFFICE USE ONLY

Is IA registered in province where client resides? ❑ Yes ❑ No | Have you personally met the client? ❑ Yes ❑ No | How long have you known the client?

ID Verification (required by Federal Law) ❑ Notary procedure ❑ Personally viewed ID ❑ Personalized cheque and photocopy of acceptable ID

______________________________ MM DD YR ____/____/____ ______________________________ MM DD YR ____/____/____
IA Signature Date Partner/Director / Branch Manager's Approval Date

Comments: ______________________________