

Account Number
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Account Name
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## Beneficiary Indemnification

*For Registered Accounts*

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**Name of Indemnifier (Beneficiary)**

\_\_\_\_\_  
**Address of Indemnifier**

\_\_\_\_\_  
**Address of Indemnifier**

### Whereas

1. The undersigned (herein called the "Indemnifier") is or purports to be the beneficiary of the proceeds of the above-noted Registered Account as appropriate (the "Plan");
2. The Indemnifier has requested Scotia iTRADE ("iTRADE"), acting as agent for The Bank of Nova Scotia Trust Company, Trustee to pay the proceeds of the Plan to him or her pursuant to a written beneficiary designation;

Now therefore in consideration of Scotia iTRADE paying to the Indemnifier or as he/she may direct the proceeds of the above-noted Plan, the Indemnifier hereby indemnifies and agrees to save harmless Scotia iTRADE and the Trustee from and against any and all claims, demands, actions, suits, losses, charges, expenses, damages or liabilities whatsoever which Scotia iTRADE may pay, sustain, suffer or incur by reason of or in connection with the payment of the proceeds of the said Plan to the Indemnifier or as he/she may direct in accordance with such written beneficiary designation.

▶ \_\_\_\_\_  
**Signature of Indemnifier (Beneficiary)**

\_\_\_\_\_  
**Date**