

Beneficiary Designation Form For RRSP, Spousal RRSP, LRSP, LIRA, LIF, RLIF and PRIF Accounts

Note: This form may not be used by Quebec residents. Quebec residents should consult a legal advisor for guidance.

Account Number	Account Number
Account Number	Account Number
Account Holder Name	

Beneficiary Designation(s)

To: Scotia iTRADE, a division of Scotia Capital Inc. ("Scotia iTRADE")

I designate the person(s) identified below as the beneficiary(s) to receive Percent Allocated of the proceeds of the Plan on my death.

1.	Name	Relationship	Percent Allocated
			%
2.	None	Deletion dele	Percent Allocated
۷.	Name	Relationship	Percent Allocated %
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3.	Name	Relationship	Percent Allocated
			%
4.	Name	Relationship	Percent Allocated
			%
_			
5.	Name	Relationship	Percent Allocated
			0/

If the total percent allocated does not add up to 100%, the remaining portion of my Plan will be paid to my estate.

If there are multiple beneficiaries designated and any of them predeceases me, their percentage interest in the monies payable under the Plan upon my death shall be payable in equal shares to the beneficiaries living at the time of my death. If all the designated beneficiaries predecease me, all monies payable under the Plan upon my death shall be paid to my estate.

A designation of a beneficiary made, changed or revoked by a person acting under a power of attorney is generally not valid under applicable provincial law and may not be given effect.

If I am domiciled in Canada at the time of my death, this beneficiary designation will be governed under the laws of the province or territory where I was domiciled at the time of my death.

If I am not domiciled in Canada at the time of my death, the laws of the province or territory in Canada where I was domiciled at the time of execution of this form will apply.

Whereas

I, the undersigned, am the registered owner of the account(s) (herein called the "Plan") noted above.

I have requested that Scotia iTRADE, acting as Agent for The Bank of Nova Scotia Trust Company, Trustee record on their records the beneficiary(ies) designated above.

I understand that, at time of death, Letters Probate or a notarial copy of the Last Will and Testament may be required to be on file with the Agent prior to disbursement of assets from the Plan.

Now, therefore, in consideration of Scotia iTRADE updating their records, I hereby agree to indemnify and save harmless Scotia iTRADE and the Trustee from and against all claims, demands, actions, suits, losses, charges, expenses, damages or liabilities whatsoever which Scotia iTRADE and the Trustee may sustain suffer or incur by reason of or in connection with such beneficiary designation.

I hereby revoke all prior beneficiary designation(s) for the Plan.

Sign	ature
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Signature of Account Holder	D	ate (MM/DD/YYYY)