

Account Number	Account Name
----------------	--------------

Personal & Regulatory Information

Indicate your relationship to the account:

- Primary owner Power Of Attorney / Corporate Trading Authority
 Joint owner Executor Other: _____

INFORMATION ABOUT YOU

Scotiocard Number (Required for online access) **Mother's Maiden Surname** (Required for online access)

If you do not have a Scotiocard, but would like online access, please check box to have one issued. Send Scotiocard: Yes No

Title **First Name** **Initial** **Last Name**

Date of Birth (mm/dd/yyyy) **Country of Citizenship**

Social Insurance Number **SSN / TIN***

* If you are a U.S citizen, a U.S dual citizen or are considered a "US Person", a Social Security Number (SSN) and W9 form are also required.

Are you (*individual or entity*) required to file a tax return in a country other than Canada or U.S.? Yes No If yes, list up to three countries and the

Tax Identification Number (TIN).

1. _____ TIN _____ 2. _____ TIN _____
 3. _____ TIN _____

RESIDENTIAL ADDRESS

Street Address / Legal Address (Address **cannot** be a post office box) **Apt/Suite No.**

Additional Address Information

City **Province** **Postal Code**

Home Phone Number **Business Phone Number** **Ext.**

Cell Phone Number **Primary Email Address** Home Business

Which number would you prefer we use to contact you during market hours? Home Business Cell

EMPLOYMENT INFORMATION

Employment Status

- Employed Retired* Student Self-Employed Homemaker Not Working Other

* If Retired, we require previous employment information

Employer **Industry**

Position / Occupation **Years with this Employer**

Employer's Address

City **Province** **Postal Code**

Scotia iTRADE® (Order-Execution Only Accounts) is a division of Scotia Capital Inc. ("SCI"). SCI is a member of the Investment Industry Regulatory Organization of Canada and the Canadian Investor Protection Fund. Scotia iTRADE does not provide investment advice or recommendations and investors are responsible for their own investment decisions.

*Registered trademark of The Bank of Nova Scotia. Used under license.



Account Number	Account Name

Personal & Regulatory Information

EMPLOYMENT INFORMATION CONTINUED

Are you employed by the Scotiabank Group? Yes No

If yes, specify _____

Are you an Insider of Scotiabank or have you been advised that you are a Designated Person by Scotiabank's Compliance Department? Yes No

Are you or members of your household employed by an IIROC (Investment Industry Regulatory Organization of Canada) Member firm (Pro)? Yes No

Note: Certain conditions may apply to accounts for employees of firms in the securities industry and accounts over which such persons have trading authority.

Annual Income

Under \$25,000
 \$25,000 to \$50,999
 \$51,000 to \$74,999
 \$75,000 to \$99,999
 \$100,000 to \$149,999
 \$150,000 to \$200,000
 Over \$200,000, Specify _____

Net Worth

Net Liquid Assets _____ A (Cash/securities less current liabilities)
 Net Fixed Assets _____ B (Fixed assets less loans against fixed assets)
 Total Net Worth _____ (A + B)

Have you Owned or Traded?

Select your level of knowledge.

Mutual Funds Low Moderate High
 Fixed Income (Other Than CSBs) Low Moderate High
 Stocks Low Moderate High
 Margin Low Moderate High
 Options Low Moderate High
 Short Sales Low Moderate High
 Overall Investment Experience Low Moderate High

INFORMATION REQUIRED BY SECURITIES REGULATORS AND COMPLIANCE

Are you or your spouse considered to be an Insider (as defined in a Provincial Securities Act) of any public companies?

Yes No If yes, what is the name of the company(ies)? _____

Are you, or your spouse, singularly, or as part of a group, in a Control Position (as defined in a Provincial Securities Act) of any public companies?

Yes No If yes, what is the name of the company(ies)? _____

Are you, or your spouse an employee, Director, Partner or Officer of a member of any Stock Exchange, IIROC Member firm or of a Stock Exchange itself?

Yes No If yes, what is the name of the company(ies)? _____

Do you own, or have trading authority or an interest in another Scotia iTRADE Account?

Yes No If yes, what is the account number(s)? _____

Do you own, or have trading authority over any other accounts with another securities firm?

Yes No If yes, what is the Name Of The Securities Firm(s)? _____

Do you or any members of your family or any close associates hold one of the following offices or positions? YES NO

If yes, choose the office or position below:

Ambassador or attaché or counsellor of an ambassador Member of the executive council of government or member of a legislature
 Deputy minister (or equivalent)
 Head of state or government Member of ruling families
 Judge of a supreme court appellate court or local equivalent Military rank of general or equivalent (or higher rank)
 Mayor or Head of a government agency President of a state-owned company or bank



Account Number	Account Name
----------------	--------------

Personal & Regulatory Information

TITLE	FIRST NAME	MIDDLE INITIAL	LAST NAME
-------	------------	----------------	-----------

RELATION TO YOU

- SELF
 CHILD
 CLOSE ASSOCIATE
 PARENT(S)
 SIBLING(S)
 SPOUSE OR COMMON LAW PARTNER
 SPOUSE OR COMMON LAW PARTNER'S PARENT(S)

DATE(S) OF POSITION HELD (FROM MM-DD-YYYY TO MM-DD-YYYY)

COUNTRY WHERE POSITION HELD

DESCRIPTION OF OFFICIAL DUTIES

MARITAL STATUS

- Single
 Married
 Common Law
 Divorced
 Legally Separated
 Widowed

INFORMATION ABOUT YOUR SPOUSE

Title	First Name	Initial	Last Name
-------	------------	---------	-----------

EMPLOYMENT STATUS OF YOUR SPOUSE

- Employed
 Retired
 Student
 Self-Employed
 Homemaker
 Not Working
 Other

Employer	Industry
----------	----------

Position / Occupation

IDENTIFICATION REQUIREMENTS

Type of Identification Document (select one)

- Driver's licence
 - Prov. Health Insurance Card (Except ON, MB, NS, PEI)
 Canadian Citizenship Card
 Age of Majority Card
 Passport

Identification Document Number

Please include a cheque in the amount of \$1.00 - Payable to Scotia iTRADE, (Starter cheques will not be accepted for deposit), as well as photo identification, when submitting this form to iTRADE.

Signature

Date