

## **Identity Verification**

Client Name	Account number

Dear Client,

To meet, regulatory requirements, please visit the nearest Scotiabank Branch and have a Scotiabank representative verify and authenticate a copy of your photo ID (verification must include the Branch location stamp and representative's signature). Note: Original identification must be presented by its owner.

TO BE COMPLETED BY SCOTIABANK BRANCH Internal Use Or	
Please photocopy (both sides for a Driver's Licence) and check off type of identification documen	t reviewed from list below:
Acceptable Identity Document Check one	Check one
Driver's licence	
Passport	
Provincial Health Card (Health card may not be collected or number recorded in MB, NS, ON and PEI. May be accepted if voluntarily provided in QC.)	
Canadian Citizenship Card	
Permanent Resident Card	
Canadian Forces Identification Card	
Certificate of Indian Status Card	
Provincial Identification Card (only in AB, BC Identification Card, BC Services Card, MB, NL, NS, PEI Voluntary ID, SK Mandatory Photo ID)	
NEXUS Card	
Identity Reference Number:	
Issuing Jurisdiction and/or Country:	
Expiry Date (mm-dd-yyyy), if applicable:	
SCOTIABANK OFFICER:	
Name:	<u> </u>
Transit Number:	_
Date:	<u> </u>

## PLEASE MAIL INTER-OFFICE THIS FORM AND PHOTOCOPY OF I.D. TO (address as noted below):

Scotia iTRADE P.O. Box 4002 Station A Toronto, ON M5W 0G4

