

**JOINT ACCOUNT HOLDER INFORMATION**

**INFORMATION ABOUT THE CO-APPLICANT**

<b>ID NUMBER</b>		<b>MOTHER'S MAIDEN SURNAME</b>	
<b>TITLE</b>	<b>FIRST NAME</b>	<b>INITIAL</b>	<b>LAST NAME</b>
<b>DATE OF BIRTH (MM/DD/YYYY)</b>		<b>COUNTRY OF CITIZENSHIP</b>	
<b>SOCIAL INSURANCE NUMBER</b>		<b>SSN / TIN*</b>	

Please provide ScotiaCard number or Scotia iTRADE User ID if you have one and Mother's Maiden Surname for Trading Authorities only.

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 _____

\*If U.S. citizens or U.S. dual citizen Social Security Number (SSN) required for Co-Applicant only. A W9 form is also required.

**RESIDENTIAL ADDRESS**

**STREET ADDRESS/LEGAL ADDRESS** (ADDRESS CANNOT BE A POST OFFICE BOX) **APT/SUITE NO.**

**ADDITIONAL ADDRESS INFORMATION**

<b>CITY</b>	<b>PROVINCE</b>	<b>POSTAL CODE</b>
<b>HOME PHONE NUMBER</b>	<b>BUSINESS PHONE NUMBER</b>	<b>EXT.</b>
<b>CELL PHONE NUMBER</b>	<b>PAGER NUMBER</b>	
<b>FAX NUMBER</b>	<b>PRIMARY EMAIL ADDRESS</b>	<input type="checkbox"/> HOME <input type="checkbox"/> BUSINESS

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

BUSINESS  HOME  CELL

**EMPLOYMENT INFORMATION**

**EMPLOYMENT STATUS**  
 EMPLOYED  RETIRED  STUDENT  SELF-EMPLOYED  HOMEMAKER  NOT WORKING  OTHER

**NAME OF EMPLOYER (IF RETIRED, FORMER EMPLOYER)** **INDUSTRY**

**POSITION / OCCUPATION** **YEARS WITH THIS EMPLOYER**

**EMPLOYER'S ADDRESS**

<b>CITY</b>	<b>PROVINCE</b>	<b>POSTAL CODE</b>
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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.*

**FINANCIAL INFORMATION** (NOT REQUIRED FOR TRADING AUTHORITY)**YOUR 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 \_\_\_\_\_

**YOUR ESTIMATED NET WORTH** (NOT REQUIRED FOR TRADING AUTHORITY)

Net Liquid Assets \_\_\_\_\_ A (Cash and securities minus current liabilities)  
 Net Fixed Assets \_\_\_\_\_ B (Fixed assets minus loans outstanding against fixed assets)  
 Total Net Worth \_\_\_\_\_ (A + B)

**HAVE YOU OWNED OR TRADED?** Select your level of knowledge.

- |   |                              |                                   |                               |
|---|------------------------------|-----------------------------------|-------------------------------|
| <input type="checkbox"/> MUTUAL FUNDS                   | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> HIGH |
| <input type="checkbox"/> FIXED INCOME (OTHER THAN CSBS) | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> HIGH |
| <input type="checkbox"/> STOCKS                         | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> HIGH |
| <input type="checkbox"/> MARGIN                         | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> HIGH |
| <input type="checkbox"/> OPTIONS                        | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> HIGH |
| <input type="checkbox"/> SHORT SALES                    | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> HIGH |
| <input type="checkbox"/> OVERALL INVESTMENT EXPERIENCE  | <input type="checkbox"/> LOW | <input type="checkbox"/> MODERATE | <input type="checkbox"/> 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?  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:

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

TITLE	FIRST NAME	MIDDLE INITIAL	LAST NAME
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**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**

**CO-APPLICANT'S BANKING INFORMATION** (NOT REQUIRED FOR TRADING AUTHORITY)

Banking information is required by Securities Regulators.

Please enter the account details in the boxes below. This information can be found on most cheques.

Your Name Your Address		DATE _____		Cheque No.	
PAY TO THE ORDER OF _____		\$ _____			
				/100 DOLLARS	
Banking Institution Name					
Branch Address					
MEMO _____					
Cheque No. ## #	Branch Transit No.	Bank Institution No.	Bank Account No.	Type of Account <input type="checkbox"/> Chq <input type="checkbox"/> Svgs	Currency <input type="checkbox"/> CDN <input type="checkbox"/> U.S.

**MARITAL STATUS**
 SINGLE  MARRIED  COMMON LAW  DIVORCED  LEGALLY SEPARATED  WIDOWED
**INFORMATION ABOUT CO-APPLICANT'S SPOUSE**

TITLE	FIRST NAME	INITIAL	LAST NAME

**EMPLOYMENT STATUS (CO-APPLICANT'S SPOUSE)**
 EMPLOYED  RETIRED  STUDENT  SELF-EMPLOYED  HOMEMAKER  NOT WORKING  OTHER

EMPLOYER

INDUSTRY

POSITION / OCCUPATION

**IDENTIFICATION REQUIREMENTS** (MANDATORY FOR NON-REGISTERED ACCOUNTS)**TYPE OF IDENTIFICATION DOCUMENT**
 DRIVER'S LICENCE  PROV. HEALTH INSURANCE CARD (EXCEPT ON, MB, NS, PEI)  CANADIAN CITIZENSHIP CARD  AGE OF MAJORITY CARD  PASSPORT

IDENTIFICATION DOCUMENT NUMBER

**CARE AND MANAGEMENT OF YOUR ACCOUNT** (NOT APPLICABLE TO TRADING AUTHORITY)

We may share personal, financial and other information about you within the Scotiabank Group to help provide you with better service across your entire relationship with us. Your consent to share your information within the Scotiabank Group enables you to access enhanced resources available within this organization, whether they are with a branch or on the Internet. By indicating your consent below, you allow us to share your information within the Scotiabank Group in accordance with the Scotiabank Group Privacy Agreement contained in the Scotia iTRADE Terms and Conditions brochure. Your consent is not a condition of your doing business with us and you may withdraw it at any time on reasonable notice by contacting Scotia iTRADE.

 I consent  I do not consent