

Plan Type Registration Change

Use this form to change the plan type registration of an existing contract from:

- Non-Registered to RSP
- RSP to RIF
- LIRA/LRSP to LIF/PRIF
- Ontario LIRA/LRIF/LIF to a new Ontario LIF
- Federal LRSP/LIF/RLSP/RLIF to another Federal plan

Plan Type Registration Change



In this form, the terms “you, “your” and “owner” refer to the person who has policyholder’s rights under the contract. The term “we” refers to *ivari*.

1 Contract Details

Name of Owner Last Name		First Name
Existing Policy Number		
Is this a nominee plan? <input type="radio"/> Yes <input type="radio"/> No	Cross Reference Number	

2 How do you want to change the Plan Type Registration of your existing contract?

PLEASE CHECK ONE ONLY. APPLICABLE TO FULL POLICY TRANSFERS ONLY.

- | | | |
|--|--|--|
| <input type="radio"/> Non-Registered to RSP | Applicable to Federal Plans Only: | <input type="radio"/> LRSP to RLIF |
| <input type="radio"/> RSP to RIF | | <input type="radio"/> LIF to LRSP/RLIF |
| <input type="radio"/> LIRA/LRSP to LIF/PRIF | | <input type="radio"/> RLSP to RLIF |
| <input type="radio"/> Ontario LIRA/LRIF/LIF to a new Ontario LIF | | <input type="radio"/> RLIF to RLSP |
| | | |

3 Is your spouse contributing to your RSP contract?

Yes No If “**Yes;**” please complete the information below.

Spouse's Name		
Sex <input type="radio"/> Male <input type="radio"/> Female	Date of Birth D D / M M / Y Y Y Y	Social Insurance Number

4 RIF, LIF/RLIF or PRIF Minimum

If legislation permits, is the RIF, LIF/RLIF or PRIF minimum based on your spouse’s or common-law partner’s age (in this application, collectively referred to as “Spouse”)?

Yes No If “**Yes;**” please complete the information below.

Spouse's Name		
Sex <input type="radio"/> Male <input type="radio"/> Female	Date of Birth D D / M M / Y Y Y Y	Social Insurance Number

For Five for Life Contracts: Using your older spouse’s age to calculate the RIF Minimum Amount will result in an Excess Withdrawal and may negatively impact the Guaranteed Lifetime Withdrawal Benefits.

This election is not applicable in New Brunswick. This election cannot be changed, even on marriage breakdown (e.g. separation, divorce) or death of your spouse. If “**No**” election is made, the minimum will be based on the owner/annuitant’s age.

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5 Do you want to name your spouse as successor annuitant (RIF only)?

Yes No If **“Yes,”** please complete the information below.

Spouse's Name _____

Sex <input type="radio"/> Male <input type="radio"/> Female	Date of Birth DD / MM / YYYY	Social Insurance Number
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Signature of successor annuitant _____ Date signed DD / MM / YYYY

For Five for Life Contracts: Please see Information Folder, section 7.6 for the readjustments of guarantee benefits when a successor annuitant becomes the annuitant.
If a successor annuitant is named, no death benefit is payable on the death of the annuitant and the contract continues.

6 How do you wish to receive the Income Payments?

FOR RIF, LIF, RLIF, PRIF POLICIES

- Scheduled Payment Option:
- RIF/LIF/RLIF/PRIF Minimum
 - LIF/RLIF/PRIF Maximum
 - Client specified level/Custom amount: \$ _____
 - Annual Guaranteed Lifetime Withdrawal Amount (GLWA)*

- Tax Withholding:
- Minimum
 - Client specified percentage Federal _____%
 - Client specified percentage Provincial (Quebec residents only) _____%

FOR RSP POLICIES

- Annual Guaranteed Lifetime Withdrawal Amount (GLWA)*
- Client specified level/Custom amount: \$ _____

First withdrawal date (1st to 28th of month): DD / MM / YYYY

Frequency: Monthly Quarterly Semi-Annually Annually

For direct deposit of payments to your bank account, **PLEASE ATTACH PERSONALIZED PRE-PRINTED VOID CHEQUE.**

All payments specified will be treated as gross.

We are required to pay you the RIF/LIF/RLIF/PRIF minimum prescribed by the Income Tax Act (Canada), starting in the second calendar year of your contract.

Payments in the first year are fully taxable and subject to the applicable withholding taxes.

If you request Level/Custom payments, the amount must be greater than the RIF minimum.

*For Five for Life Contracts: Your withdrawals may exceed your annual Guaranteed Lifetime Withdrawal Amount (GLWA), which may impact the Guaranteed Lifetime Withdrawal Benefit. Please see Information Folder, section 7.3.6.

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Source of withdrawal:

FUND NAME	FUND CODE	AMOUNT (%* OR \$)

*allocation by % must equal 100%

Additional withdrawal instructions:

7 For a LIF, RLIF or PRIF, do you have a spouse within the meaning of applicable pension legislation?

Yes No If **“Yes;”** please complete the information below.

For British Columbia, Alberta, Saskatchewan and Manitoba, please attach a completed spousal consent or waiver form.

For Ontario, Newfoundland & Labrador, Nova Scotia, Federal (includes Yukon, NWT and Nunavut), your spouse must sign below to indicate his/her consent to purchase the LIF/RLIF.

Signature of Spouse

DD / MM / YYYY
Date signed

8 Owner Acknowledgement and Authorization

Your signature below confirms that:

- You have requested a change of plan type registration of your contract as indicated above.
- In a LIF/RLIF or PRIF, the rights of the beneficiary you have designated may be restricted by the terms of the endorsement.
- If you hold an Ontario LIRA, LIF or LRIF and/or a Federal LRSP, LIF, RLSP or RLIF you acknowledge and agree that:
 - The pension legislation has eliminated the requirement to annuitize the contract when you turn 80. As a result of the legislative change, the Contract Maturity Date for your contract (except if you hold a GROWSafe 1997 and/or 1999) will be extended to December 31st of the year you turn 100.

Signature of owner/beneficial owner*

DD / MM / YYYY
Date signed

Province

Signature of nominee (for registered plans)

DD / MM / YYYY
Date signed

*Beneficial owner for contracts held in nominee name

9 Advisor Information

By signing below, the advisor confirms having verified the spouse's age, if applicable.

Signature of Advisor

DD / MM / YYYY
Date signed

GA/Dealer Code _____ SA/Rep code _____ Advisor/Rep Name _____



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