

# SUN GIF SOLUTIONS & SUN LIFETIME ADVANTAGE GIF

NOMINEE & INTERMEDIARY

APPLICATION

**JUNE 2021**

Sun GIF Solutions and Sun Lifetime Advantage GIF are individual variable annuity contracts issued by Sun Life Assurance Company of Canada, a member of the Sun Life group of companies.

# Sun Life Guaranteed Investment Funds (GIFs) – Nominee & Intermediary Application



Sun Life Assurance Company of Canada – 30 Adelaide Street East, Suite 1 Toronto, ON M5C 3G9 Fax: 1-855-247-6372

Toll Free English: 1-844-753-4437 (1-844-SLF-GIFS) Toll Free French: 1-844-374-1375 (1-844-FPG-IFSL)

## Product and registration type

Select one product type, nominee or intermediary and one registration type.

Sun GIF Solutions  Sun Lifetime Advantage GIF

Nominee  Intermediary

Non-registered  RSP  RIF  TFSA

Note: For nominee registered contracts, the trust has owner rights under the contract. The trustee (or agent for the trustee) holds the contract in trust for the beneficial owner. For non-registered contracts, the beneficial owner has owner rights under the contract.

## Nominee information

|                             |  |
|-----------------------------|--|
| Nominee/intermediary's name | Trustee's name (for registered plans only)     |
| Wire order number           | Dealer/Distributor's contract (account) number |
| Nominee authorization stamp |  |

## Beneficial owner information and identity verification

The beneficial owner is the annuitant unless you have named another in the **Annuitant information** section.

|   |  |  |                      |
|---|--|--|----------------------|
| Beneficial owner's last name or name of corporation/entity                              | First name   | Middle name  |                      |
| Email address   |  | Sex <input type="checkbox"/> Male<br><input type="checkbox"/> Female |                      |
| Beneficial owner's residential address (PO Box and general delivery are not acceptable) |  |  |                      |
| City  | Province   | Postal code  | Country of residency |
| Date of birth (dd-mm-yyyy)  | Social insurance number (SIN)/Business number (BN) |  | Telephone number     |

Is mailing address the same as residential address?  Yes  No

If no, please complete mailing address.

|                 |          |             |
|-----------------|----------|-------------|
| Mailing address |          |             |
| City            | Province | Postal code |

**The rest of this section is for non-registered contracts (excluding corporate, estate or trust) - COMPLETION IS MANDATORY.**

|  |
|--|
| Detailed occupation /Principal business (If retired, indicate former occupation) |
|--|

DEFKSLF05



**THREE COPIES OF THIS APPLICATION ARE REQUIRED TO BE  
PRINTED AND SIGNED BY THE CLIENT**

For SLF use:  
DLRAPPE

## Beneficial owner information and identity verification (continued)

For entity applications (estate, trust, corporate, partnerships etc.) the **International tax classification for an entity (4545-E)** form and **Identity verification and third party determination for entity owners (4831-E)** form are mandatory.

We will retain the information collected on this form for our records until you advise us of a change. A change includes information that affects your tax residency outside of Canada such as a change in address or telephone number. You must notify us within 30 days of all changes and provide us with a new [International tax self-certification for individuals \(4573-E\)](#) form.

|   |  |  |
|---|--|--|
| <b>FATCA</b><br>Are you a U.S. resident for tax purposes (which includes a U.S. citizen)?<br><input type="checkbox"/> No <input type="checkbox"/> Yes   If yes, provide a U.S. Taxpayer Identification Number (TIN).  |  | U.S. Taxpayer Identification Number  |
| <b>CRS</b><br>Are you a resident of any other jurisdiction other than Canada and the U.S. for tax purposes?<br><input type="checkbox"/> No <input type="checkbox"/> Yes   If yes, provide your jurisdictions of tax residence and Taxpayer Identification Numbers (TINs). |  |  |
| Jurisdiction of tax residence   |  | If you do not have a Taxpayer Identification Number (TIN), give the reason using one of these choices:<br><input type="checkbox"/> Reason A: I have applied for a TIN but have not yet received it.<br><input type="checkbox"/> Reason B: My jurisdiction of tax residence does not issue TINs to its residents.<br><input type="checkbox"/> Other: Specify the reason _____ |
| Taxpayer Identification Number  |  |  |
| <b>Note:</b> If you need to enter more than one tax jurisdiction and TIN, complete the <a href="#">International tax self-certification for individuals (4573-E)</a> form.  |  |  |

Always verify the identity of clients and find out whether any third parties are involved. This helps Sun Life to manage risk and to comply with the Proceeds of Crime (Money Laundering) and Terrorist Financing Act and other relevant legislation/regulations.

If additional space is required, for any part of this section or the Dual process is being used for Identification, please complete the relevant section on the [Identity verification, third party determination and politically exposed persons \(PEP\) for individual owners \(4830-E\)](#) form and attach it to this application. How many 4830-E forms have been completed for this application/contract? # \_\_\_\_\_

### Identification method

Complete **one** of the below methods (A, or B). Record all the information; do not attach photocopies.

#### A) Photo identification

View an original valid and current Canadian passport, driver's licence or document issued by a Canadian federal, provincial or territorial government for that individual. A foreign photo identification document is acceptable if it is equivalent to an acceptable Canadian photo identification document.

|                                   |                   |                 |                                   |
|-----------------------------------|-------------------|-----------------|-----------------------------------|
| Type of document                  |                   | Document number |                                   |
| Document expiry date (dd-mm-yyyy) | Province of issue | Country         | Date of verification (dd-mm-yyyy) |

B) Dual process – complete **ONLY** Section 1, Section 6 and Section 7 of the [Identity verification, third party determination and politically exposed persons \(PEP\) for individual owners \(4830-E\)](#) form. Ensure that the **Third party determination, PEP and HIO information** section is completed on this application.

## Joint beneficial owner, in trust for or spousal registered plan information and identity verification

Joint beneficial owner and in trust for (ITF) contracts are not permitted for registered contracts.

Complete this section for a spousal RSP/RIF.

**For joint beneficial owner contracts, if you want the contract to continue after the death of the annuitant, the Successor annuitant section must be completed.**

Joint beneficial owner with right of survivorship (not applicable in Quebec)    ITF  
 Joint beneficial owner (including tenants in common)    Spousal contributor

|                            |                               |                      |  |
|----------------------------|-------------------------------|----------------------|--|
| Last name                  | First name                    | Middle name          | Sex <input type="checkbox"/> Male<br><input type="checkbox"/> Female |
| Date of birth (dd-mm-yyyy) | Social insurance number (SIN) | Country of residency |  |

### Signing authority

Only one signature required. Certain transactions such as beneficiary designations will require both signatures. If not selected, both signatures will be required for all transactions. Other limitations may apply.

### Subrogated policyholders – In Quebec only:

Check here if you (the owner) and joint owner would like to name each other as subrogated policyholders.

**The rest of this section is for non-registered contracts (excluding corporate, estate or trust) – completion is mandatory**

|  |
|--|
| Detailed occupation /Principal business (If retired, indicate former occupation) |
|--|

## Joint beneficial owner, in trust for or spousal registered plan information and identity verification (continued)

We will retain the information collected on this form for our records until you advise us of a change. A change includes information that affects your tax residency outside of Canada such as a change in address or telephone number. You must notify us within 30 days of all changes and provide us with a new [International tax self-certification for individuals \(4573-E\)](#) form.

|   |  |  |
|---|--|--|
| <b>FATCA</b><br>Are you a U.S. resident for tax purposes (which includes a U.S. citizen)?<br><input type="checkbox"/> No <input type="checkbox"/> Yes   If yes, provide a U.S. Taxpayer Identification Number (TIN).  |  | U.S. Taxpayer Identification Number  |
| <b>CRS</b><br>Are you a resident of any other jurisdiction other than Canada and the U.S. for tax purposes?<br><input type="checkbox"/> No <input type="checkbox"/> Yes   If yes, provide your jurisdictions of tax residence and Taxpayer Identification Numbers (TINs). |  |  |
| Jurisdiction of tax residence<br>Taxpayer Identification Number   |  | If you do not have a Taxpayer Identification Number (TIN), give the reason using one of these choices:<br><input type="checkbox"/> Reason A: I have applied for a TIN but have not yet received it.<br><input type="checkbox"/> Reason B: My jurisdiction of tax residence does not issue TINs to its residents.<br><input type="checkbox"/> Other: Specify the reason _____ |
| <b>Note:</b> If you need to enter more than one tax jurisdiction and TIN, complete the <a href="#">International tax self-certification for individuals (4573-E)</a> form.  |  |  |

Always verify the identity of clients and find out whether any third parties are involved. This helps Sun Life to manage risk and to comply with the Proceeds of Crime (Money Laundering) and Terrorist Financing Act and other relevant legislation/regulations.

If additional space is required, for any part of this section or the Dual process is being used for Identification, please complete the relevant section on the [Identity verification, third party determination and politically exposed persons \(PEP\) for individual owners \(4830-E\)](#) form and attach it to this application. How many 4830-E forms have been completed for this application/contract? # \_\_\_\_\_

### Identification method

Complete **one** of the below methods (A or B). Record all the information; do not attach photocopies.

#### A) Photo identification

View an original valid and current Canadian passport, driver's licence or document issued by a Canadian federal, provincial or territorial government for that individual. A foreign photo identification document is acceptable if it is equivalent to an acceptable Canadian photo identification document.

|                                   |                   |                 |                                   |
|-----------------------------------|-------------------|-----------------|-----------------------------------|
| Type of document                  |                   | Document number |                                   |
| Document expiry date (dd-mm-yyyy) | Province of issue | Country         | Date of verification (dd-mm-yyyy) |

B) Dual process – complete **ONLY** Section 1, Section 6 and Section 7 of the [Identity verification, third party determination and politically exposed persons \(PEP\) for individual owners \(4830-E\)](#) form. Ensure that the **Third party determination, PEP and HIO information** section is completed on this application.

## Annuitant information

For non-registered contracts, complete if annuitant is different from the beneficial owner.

For registered contracts, the annuitant must be the beneficial owner.

If this section is not completed, the annuitant will be the same as the beneficial owner.

|                       |                            |                                  |  |
|-----------------------|----------------------------|----------------------------------|--|
| Annuitant's last name | First name                 | Middle name                      | Sex <input type="checkbox"/> Male<br><input type="checkbox"/> Female |
| Country of residency  | Date of birth (dd-mm-yyyy) | Relationship to beneficial owner |  |

## Successor annuitant information

### For non-registered and RIF contracts only.

For RIF contracts the successor annuitant must be the annuitant's spouse.

**If you want the contract to continue after the death of the annuitant, this section must be completed.**

Check here if the successor annuitant is the same as the joint beneficial owner.

|                                  |            |             |  |
|----------------------------------|------------|-------------|--|
| Successor annuitant's last name  | First name | Middle name | Sex <input type="checkbox"/> Male<br><input type="checkbox"/> Female |
| Relationship to beneficial owner |            |             |  |

## Successor beneficial owner information

### For non-registered and TFSA contracts only.

Complete only if the contract is to continue after the death of the beneficial owner.

|  |            |             |  |
|--|------------|-------------|--|
| Successor beneficial owner's last name | First name | Middle name | Sex <input type="checkbox"/> Male<br><input type="checkbox"/> Female |
| Relationship to beneficial owner       |            |             |  |

## Lifetime guaranteed income option

Must be selected if purchasing Income Series or Sun Lifetime Advantage GIF and cannot be changed.

For contracts with joint life income option, other than RRSPs, the joint life must also be the successor annuitant for the income to continue.

- Single life income option** (must be the annuitant).
- Joint life income option** (must be the annuitant's spouse or common-law partner as defined by the Income Tax Act (Canada)). Provide details below.
- Check here if the joint life is the same as the joint beneficial owner/spousal contributor indicated in the **Joint beneficial owner, in trust for or spousal registered plan information** section.

|                            |            |             |
|----------------------------|------------|-------------|
| Last name                  | First name | Middle name |
| Date of birth (dd-mm-yyyy) |            |             |

## Beneficiary designation

### For non-registered contracts only.

\*Relationship of the beneficiary to the annuitant except in Quebec where it is the relationship to the beneficial owner.

**Note:** If a beneficiary dies before the death of the last surviving annuitant, unless there is a contingent beneficiary for that share, the deceased beneficiary's share will be payable to the owner or estate of the owner if the owner is deceased.

#### Primary beneficiary #1

|  |               |         |
|--|---------------|---------|
| Name   | Relationship* | Share % |
| Contingent beneficiary(ies) for this primary beneficiary's share (The total percentage for contingent beneficiary(ies) must equal 100% for each primary beneficiary) |               |         |
| Name   | Relationship* | Share % |
| Name   | Relationship* | Share % |

#### Primary beneficiary #2

|  |               |         |
|--|---------------|---------|
| Name   | Relationship* | Share % |
| Contingent beneficiary(ies) for this primary beneficiary's share (The total percentage for contingent beneficiary(ies) must equal 100% for each primary beneficiary) |               |         |
| Name   | Relationship* | Share % |
| Name   | Relationship* | Share % |

#### Primary beneficiary #3

|  |               |         |
|--|---------------|---------|
| Name   | Relationship* | Share % |
| Contingent beneficiary(ies) for this primary beneficiary's share (The total percentage for contingent beneficiary(ies) must equal 100% for each primary beneficiary) |               |         |
| Name   | Relationship* | Share % |
| Name   | Relationship* | Share % |

|   |
|---|
| Name of trustee(s) appointed for minor beneficiary(ies) (In Quebec any amount payable to a minor beneficiary during his/her minority will be paid to the parent(s) or legal guardian of the minor child.) |
|---|

## Beneficiary designation (continued)

- A separate beneficiary designation with additional/alternate beneficiary or contingent beneficiary instructions is attached.

I (We) choose to designate \_\_\_\_\_ as irrevocable beneficiary(ies).

**In Quebec:** the designation of a spouse (married or civil union) as beneficiary is irrevocable unless the owner checks revocable here:  Revocable

### Legacy settlement option:

- I (We) choose to have one or more of the beneficiaries receive their share of the death benefit as a payout annuity. Complete the [Legacy settlement option – Sun Life Guaranteed Investment Funds \(4633-E\)](#) form along with this application.

## Special instructions

|  |
|--|
|  |
|  |
|  |
|  |

## Third party determination, PEP and HIO information

### For non-registered contracts only.

Corporate, partnership, in trust for, estate and trust contracts require the **Identity verification, third party determination and politically exposed persons (PEP) for individual owners (4830-E)** form

Is the contract to be paid for, used by, signed for or on behalf of a third party?

- No If no, complete the rest of this section.
- Yes If yes, attach a completed [Identity verification, third party determination and politically exposed persons \(PEP\) for individual owners \(4830-E\)](#) form

To the best of the applicant/owner's knowledge, has the applicant/owner, their family member or close associate held any of the PEP or HIO positions listed on the 'What you understand and agree to when you sign this application' at the end of this application?

- No If no, complete the rest of this section.
- Yes If yes, attach a completed [Identity verification, third party determination and politically exposed persons \(PEP\) for individual owners \(4830-E\)](#) form

Provide the source of payment for this application/contract. (select all that apply)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> salary or earned income     | <input type="checkbox"/> applicant/owner's savings | <input type="checkbox"/> business income                        |
| <input type="checkbox"/> existing investment account | <input type="checkbox"/> borrowed funds            | <input type="checkbox"/> pension income                         |
| <input type="checkbox"/> gifted funds                | <input type="checkbox"/> sale of property          | <input type="checkbox"/> proceeds from death benefits or estate |
| <input type="checkbox"/> inherited funds             | <input type="checkbox"/> social benefits           | <input type="checkbox"/> other (give details below)             |

What is the purpose and intended use of the product applied for (including an annuity product which may include periodic payments at some point under the contract)? (select all that apply)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> savings       | <input type="checkbox"/> cash reserves      | <input type="checkbox"/> emergency fund             |
| <input type="checkbox"/> vacation fund | <input type="checkbox"/> retirement savings | <input type="checkbox"/> educational purposes       |
| <input type="checkbox"/> income        | <input type="checkbox"/> legacy/inheritance | <input type="checkbox"/> other (give details below) |

## Acknowledgement/authorization

**Mandatory** – All beneficial owners, annuitant(s) and joint life (if applicable) must read and sign this section.

**I (We) agree to have my (our) advisor send the individual variable annuity information folder and contract including any supplements and the fund facts to me (us) electronically.**

I (We):

- declare that all statements and answers made by me (us) on this application are complete and true,
- acknowledge having received, read and agreed to the provisions in Respecting your privacy in this application and authorize Sun Life Assurance Company of Canada (Sun Life) to obtain, use, and transmit to its agents, distribution partners and service providers, personal information about me (us) for the purpose of the administration, processing and servicing of this contract,
- request that all documents delivered to me (us) in connection with this contract to be written in English. Je (Nous) demande(ons) que tous les documents qui me (nous) sont remis avec ce contrat soient rédigés en langue anglaise,
- **acknowledge receipt (either electronically or paper) of the individual variable annuity information folder and contract including any supplements and the fund facts before signing the application,**
- **acknowledge that I (we) have read the 'What you understand and agree to when you sign this application' section at the back of this application.**
- acknowledge that possible creditor protection may be lost by having the contract held in the name of an investment dealer, a trustee of the nominee registered plan or someone who is not the beneficial owner,
- agree to provide any further information which may be required in connection with the registration and administration of this contract, and
- authorize Sun Life and any of its agents to deliver confirmations, statements and other documents to the distributor and to accept instructions from the distributor to execute financial and non-financial transactions according to your instructions and the contract provisions.

### Transaction authorization

I (We) authorize Sun Life and any of their agents to act on instructions from my (our) advisor if they reasonably believe my (our) advisor received these instructions orally or in writing from me (us). These instructions are limited to the transactions listed in the Transaction Authorization section of the 'What you understand and agree to when you sign this application' pages on the back of this application.

| Signed at (city) – <b>Mandatory</b>                         |  | Signed at (province) – <b>Mandatory</b> |  |
|---|--|---|--|
| Beneficial owner's signature<br>X                           |  | Date (dd-mm-yyyy)                       |  |
| Joint beneficial owner's signature<br>X                     |  | Date (dd-mm-yyyy)                       |  |
| Annuitant's signature (if not the owner)<br>X               |  | Date (dd-mm-yyyy)                       |  |
| Joint life's signature * (must be spouse of annuitant)<br>X |  | Date (dd-mm-yyyy)                       |  |
| Parent/guardian's signature **<br>X                         |  | Date (dd-mm-yyyy)                       |  |

\*Required if joint life income option is selected.

\*\*Parent/guardian's signature is only required where the annuitant is different from the owner and is under the age of 16 (18 in Quebec).

## Advisor information and acknowledgement

**Mandatory** – Advisors must read, complete and sign this section.

For the purchase of a nominee non-registered contract: with the understanding that Sun Life will rely on the information to conduct client due diligence and to satisfy applicable regulatory requirements, I confirm that I have reviewed the details provided in this form, including the 'What you understand and agree to when you sign this application' section, with the applicant/beneficial owner(s) and to the best of my knowledge, unless otherwise noted, these details are full, complete and true.

I confirm that I have disclosed to the beneficial owner(s) (a) the companies I represent, (b) that I will receive compensation in the form of commissions or salary for the sale of this product, (c) that I may also receive additional compensation in the form of bonuses or non-monetary benefits such as travel incentives or attendance at conferences, and (d) any conflict of interest I may have with respect to the sale of this product.

- If there are reasonable grounds to suspect there is an undisclosed third party, HIO or PEP involved, please email details to [money.laundering@sunlife.com](mailto:money.laundering@sunlife.com).

|   |                       |                  |                   |
|---|-----------------------|------------------|-------------------|
| Advisor's last name                         |                       | First name       |                   |
| Dealer/distributor code/number              | Advisor's code/number | Telephone number |                   |
| Advisor's signature<br>X                    |                       | Province         | Date (dd-mm-yyyy) |
| Supervisor's signature (if applicable)<br>X |                       |                  |                   |

**For non-registered contracts only** – Complete the following if the advisor verifying the identity is different from the servicing advisor.

|                     |            |                             |                   |
|---------------------|------------|-----------------------------|-------------------|
| Advisor's last name | First name | Dealer/distributor's number | Date (dd-mm-yyyy) |
|---------------------|------------|-----------------------------|-------------------|



## What you understand and agree to when you sign this application

In this application, “you”, “your”, and “owner” mean the beneficial owner of the contract. For non-registered contracts there can be more than one beneficial owner. “Sun Life”, “we”, “us” and “our” mean Sun Life Assurance Company of Canada.

Sign the **Acknowledgement/authorization** section of this application to confirm you understand the following:

**Beneficiary designation** (Nominee non-registered contracts only)

**The following information applies to beneficiary designations made using this application form.**

You can appoint a beneficiary(ies). If a Power of attorney (POA) is signing the application on behalf of the owner, they are only permitted to name the owner's estate as beneficiary.

If a beneficiary dies before the death of the last surviving annuitant, that beneficiary's share of the death benefit will be payable to the contingent beneficiary(ies) named for that share, who survive the last surviving annuitant. If there is no contingent beneficiary who has survived that last surviving annuitant, the beneficiary's share is payable to the beneficial owner, or if the beneficial owner is deceased, to the estate of the beneficial owner.

For contracts governed by Quebec legislation, these provisions apply whether or not the shares of beneficiaries of any class are equal or unequal.

In all provinces other than Quebec,

- you can change your beneficiary(ies) without their consent unless you indicate that the designation is irrevocable.
- if you designate minor children as beneficiaries, you should also name a trustee to receive funds on their behalf.

In Quebec,

- if you name your legal spouse (married or civil union) as the beneficiary, this designation will be irrevocable unless you check the "Revocable" box in the **Beneficiary designation** section.
- if you name someone other than your legal spouse (married or civil union) as the beneficiary, you can change your beneficiary(ies) without their consent unless you indicate that the designation is irrevocable.
- any amount payable to a minor beneficiary will be paid to the parent(s) or legal guardian.

**Identity verification, third party determination and politically exposed person declarations**

To comply with the Proceeds of Crime (Money Laundering) and Terrorist Financing Act and for risk management purposes, the identity of non-registered clients must be verified and the existence and involvement of any third parties determined. Complete the **Beneficial owner information and identity verification** section, **Joint beneficial owner, in trust for or spousal registered plan information and identity verification** section (if applicable) and the **Third party determination, PEP and HIO information** section.

**For corporate, partnership, estate and trust contracts the Identity verification and third party determination for entity owners (4831-E) form will be required.**

Types of third parties include, for example: payor, executor, attorney (power of attorney) or mandatary, collateral assignee / hypothecary creditor.

**Politically exposed person (PEP)** – a Politically exposed person (PEP) is a person, who is either a Politically exposed foreign person (PEFP) or Politically exposed domestic person (PEDP) who holds or has held any of the following positions, or a family member or close associate of that person.

**Politically exposed foreign person (PEFP)** – country other than Canada (living or deceased, current or ever held)

- Member of the executive council of government
- Deputy minister (or equivalent rank) in government
- President (head) of a state-owned bank
- Counsellor of an ambassador
- President (head) of a state-owned company
- Leader (or president) of a political party represented in a legislature
- Ambassador
- Head of government
- Attaché
- Head of a government agency
- Head of state
- Military officer with a rank of general or above
- Member of a legislature
- Judge of a supreme court, constitutional court or other court of last resort

**Politically exposed domestic person (PEDP)** – in Canada (living or deceased, current or in last 5 years)

- Governor General
- President of a corporation that is wholly owned directly by Her Majesty in right of Canada or a province
- Lieutenant Governor
- Head of a government agency
- Member of the Senate
- Judge of an appellate court in a province
- Member of the House of Commons
- Judge of the Federal Court of Appeal
- Member of a legislature
- Judge of the Supreme Court of Canada
- Deputy minister (or equivalent rank) in government
- Leader (or president) of a political party represented in a legislature
- Ambassador
- Mayor
- Counsellor of an ambassador
- Holder of any prescribed office or position
- Attaché
- Military officer with a rank of general or above

**Head of international organization (HIO) (currently held)** – a person is a HIO if they are the head of an international organization or the head of an institution established by an international organization. An international organization is an organization set up by the governments of more than one country and established by means of a formally signed agreement between those governments.

Examples of international organizations include but are not limited to:

- North Atlantic Treaty Organization (NATO)
- Organization for Economic Co-operation and Development (OECD)
- International Monetary Fund (IMF)
- World Bank Group
- World Health Organization (WHO)
- La Francophonie

HIO includes a family member or close associate of that person.

Note for the purposes of the definitions above:

1. Family member is a spouse, civil union spouse or common-law partner, child/step child, sibling/half sibling/step sibling of the contractholder, biological/adoptive/step parent of the contractholder, or biological/adoptive/step parent of the spouse, civil union spouse or common law partner.
2. Close associate is someone who is closely associated with the other person, for personal or business reasons. Examples of circumstances that may lead to the determination that a person is closely associated include but are not limited to:
  - Transactions that occur between a PEP or a HIO and the client;
  - Business activities between a PEP or HIO and the client;
  - Media coverage linking a PEP or HIO and the client; and
  - A personal relationship such as a romantic relationship or a close friendship between a PEP or HIO and the client.

### **Respecting your privacy**

Respecting your privacy is a priority for the Sun Life group of companies. We keep in confidence personal information about you and the products and services you have with us to provide you with investment, retirement and insurance products and services to help you meet your lifetime financial objectives. To meet these objectives, we collect, use and disclose your personal information for purposes that include: underwriting; administration; claims adjudication; protecting against fraud, errors or misrepresentations; meeting legal, regulatory or contractual requirements; and we may tell you about other related products and services that we believe meet your changing needs. The only people who have access to your personal information are our employees, distribution partners such as advisors, and third-party service providers, along with our reinsurers. We will also provide access to anyone else you authorize. Sometimes, unless we are otherwise prohibited, these people may be in countries outside Canada, so your personal information may be subject to the laws of those countries. You can ask for the information in our files about you and, if necessary, ask us in writing to correct it. To find out more about our privacy practices, visit [www.sunlife.ca/privacy](http://www.sunlife.ca/privacy).

### **Transaction authorization (TA)**

With this transaction authorization you authorize your advisor named on this application to instruct Sun Life on your behalf to process only the following transactions:

- New premium deposits
- Switches between funds – this does not include DSC to FEL requests. The order ticket must be used as this switch may impact guarantees and requires a client signature each time
- Changes to pre-authorized chequing (PAC) or systematic withdrawal plans (SWP) including increasing or decreasing the amount, changing the frequency, changing funds or restarting the PAC within 6 months of it stopping.
- Redemptions up to a maximum of \$50,000 gross with the proceeds delivered to your address currently on file or banking information currently on file. Redemptions over \$50,000 require a client signature and a signature guarantee.

**Note:** Keep a record of all instructions you give to your advisor and check your confirmation statements to ensure the transactions match your instructions. You may revoke this TA by providing written notice to Sun Life. The TA will end if Sun Life receives notice of your death, written notice or evidence of your mental incapacity or bankruptcy, a change in your advisor of record on your contract, notice of the bankruptcy of your advisor or a new TA. Sun Life may refuse to accept or process transactions under this TA. This TA does not apply to contracts with an irrevocable beneficiary. Contact your advisor if you have any questions.

**ANY AMOUNT THAT IS ALLOCATED TO A SEGREGATED FUND IS INVESTED AT THE RISK OF THE CONTRACT OWNER AND MAY INCREASE OR DECREASE IN VALUE.**

Sun Life Global Investments is a trade name of SLGI Asset Management Inc., Sun Life Assurance Company of Canada and Sun Life Financial Trust Inc.