



MCAN Financial Group
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Name:
 Date Received:
 Amount: \$
 Personal CQ Maturity CQ MCAN CQ
 By: 1st 2nd**/QC
 Existing client (for ** below)

Non-Registered Term Deposit Application
 Anti-Money Laundering / Anti-Terrorist Financing / Disclosure Checklist

Name	Occupation (specific)	Occupation Type	Industry Sector	Current EDD Category	EDD Outcome
Primary Applicant/SO 1					
Joint App 1/SO 2/POA					
Joint App 2/SO 3					
Director(s):					
Beneficial Owner(s):					

If deposit amount is \$50,000 or more, provide source of funds or former occupation (only for not employed):

Source of Funds and Registration

Clear copy of a cheque drawn on a Canadian bank to purchase the investment
 Cheque payee(s) must be matched with names on application
 Full name of all applicants, or business/partnership/organization/corporation as applicant
 Civic/Legal address in Canada (PO BOX is not acceptable for urban areas)

Signing Date

Date of when the client's identity was verified **CIF 1**
 All documents dated and signed within two years¹ **CIF 2**
CIF 3

For applicants/partners/authorized persons/executors/POA:

1 piece of valid (unexpired) government issued ID viewed in person
 Date of Birth
 Signature on application/CICF **NOTE: AGENT MUST CERTIFY CLIENT ID IS VALID AND UNEXPIRED**

Declaration: Photo ID Dual process Credit file **Agent Registration: CSA RDBA AMF**

Purpose of Investment: Savings/investment Other, please specify

Applicable Client Information Consent Form and Client Identity Verification Form **CF**

Third party determination/declaration (acting on someone else's instructions)

Agent certification and disclosure as per Deposit Type Instruments Regulations

Politically Exposed Person (PEP) determination/declaration (if yes, approval required)

Are you a U.S. person? If yes, Taxpayer Identification Number (for existing client): **TIN**

Specific requirements for: A = Attached ✓ = On file

Individual/Joint/Estate:	Corporation **	Other Entities**
Social Insurance Number	Business Number	Business Number
	Articles of Incorporation	Articles of Association/Trust/ Partnership Agreement
Estate:	Incumbency Certificate/Corp Consent Form	Incumbency Certificate/Corp Consent Form
Certificate of appointment of estate trustee/copy of will to confirm executor	Existence of corporation such as Certificate of Status, or annual regulatory filing	Name and address confirmed
	Name and address confirmed	Existence of Entity/CRA Charities Listing
Death Certificate	Director & Trust Listing form	Director & Trust Listing form
	Beneficial Ownership Form	Beneficial Ownership Form
	Nature of Business	Nature of Business

¹For Corporation and other entities, agent must confirm if the signing officers are new or existing. A CICF and CIVF will be required for any new signing officers

Type of Exception:

Retired Senior Active Deposit(s) Joint owner ID ok Client since: