



STATEMENT OF PERSONAL AFFAIRS

Important Note Regarding Your Privacy

The Bank is committed to protecting my privacy and using the utmost discretion in handling the personal information I entrust it with. Please carefully read the section "Consent to Collection, Use and Disclosure of Personal Information" herein, which describes how the Bank collects, uses, and if necessary discloses my personal information when doing business with you.

TO SPEED UP PROCESSING, PLEASE WRITE LEGIBLY, IN BLOCK LETTERS.

1. PERSONAL INFORMATION

	APPLICANT		CO-APPLICANT/SPOUSE	
LAST NAME NAME AT BIRTH, IF APPLICABLE				
FIRST AND MIDDLE NAMES				
DATE OF BIRTH	DD-MM-YYYY	AGE :	DD-MM-YYYY	AGE :
SOCIAL INSURANCE NO. (OPTIONAL)				
MARITAL STATUS	<input type="checkbox"/> SINGLE	<input type="checkbox"/> MARRIED	<input type="checkbox"/> SINGLE	<input type="checkbox"/> MARRIED
CITIZENSHIP				
NUMBER OF DEPENDENTS	CHILD(REN) :	OTHER :	CHILD(REN) :	OTHER :
CORRESPONDENCE LANGUAGE	<input type="checkbox"/> FRENCH	<input type="checkbox"/> ENGLISH	<input type="checkbox"/> FRENCH	<input type="checkbox"/> ENGLISH

	APPLICANT		CO-APPLICANT/SPOUSE	
TELEPHONE				
EMAIL				
CURRENT ADDRESS (civic No., street and apt.)				
CITY				
PROVINCE / STATE				
POSTAL CODE / ZIP CODE				
COUNTRY				
SINCE	YEAR(S)	MONTH(S)	YEAR(S)	MONTH(S)

<input type="checkbox"/> OWNER <input type="checkbox"/> TENANT <input type="checkbox"/> OTHER : _____	OWNER'S NAME / HYP. CREDITOR:	MTHLY HYP/MTG PMT (P + I): \$			
	TELEPHONE:	MONTHLY RENT: \$			
PREVIOUS ADDRESS, IF LESS THAN 2 YEARS	PREVIOUS ADDRESS:	SINCE:			
	NAME OF LANDLORD:	TELEPHONE:			
MAILING ADDRESS (IF OTHER THAN RESIDENCE)	CIVIC NO. AND STREET / APT. NO.	CITY	PROVINCE	POSTAL CODE	COUNTRY

2. INFORMATION ON OCCUPATION

TYPE OF OCCUPATION	<input type="checkbox"/> EMPLOYED	<input type="checkbox"/> SELF-EMPLOYED	<input type="checkbox"/> EMPLOYED	<input type="checkbox"/> SELF-EMPLOYED
	<input type="checkbox"/> SEASONAL	<input type="checkbox"/> STUDENT	<input type="checkbox"/> SEASONAL	<input type="checkbox"/> STUDENT
	<input type="checkbox"/> INAPT TO WORK (permanent incapacity)		<input type="checkbox"/> INAPT TO WORK (permanent incapacity)	
	<input type="checkbox"/> UNEMPLOYED, indicate the client's last occupation/area of activity.		<input type="checkbox"/> UNEMPLOYED, indicate the client's last occupation/area of activity.	
	<input type="checkbox"/> RETIRED WORKER, indicate the client's last occupation/area of activity BEFORE retirement.		<input type="checkbox"/> RETIRED WORKER, indicate the client's last occupation/area of activity BEFORE retirement.	
OCCUPATION – Refer to the Excel list	INDUSTRY SECTORS:		INDUSTRY SECTORS:	
	OCCUPATION:		OCCUPATION:	
EMPLOYER NAME				
EMPLOYER ADDRESS				
EMPLOYER TELEPHONE NUMBER		EXT:		EXT :
EMPLOYEE NO.		SINCE : YEAR(S) MONTH(S)		SINCE : YEAR(S) MONTH(S)
GROSS ANNUAL INCOME (\$)				
CREDIT UNION <input type="checkbox"/> YES <input type="checkbox"/> NO	NAME: TEL.:		NAME: TEL.:	
IF LESS THAN 3 YEARS, PREVIOUS EMPLOYER AND PHONE NUMBER				
REFERENCES	NAME AND ADDRESS		TELEPHONE	RELATIONSHIP
1)				
2)				
3)				

3. DEPOSITS IN OTHER BANKS, CREDIT UNIONS, TRUST COMPANIES

	<input type="checkbox"/> APPLICANT	<input type="checkbox"/> APPLICANT	<input type="checkbox"/> APPLICANT	<input type="checkbox"/> APPLICANT
	<input type="checkbox"/> CO-APPLICANT	<input type="checkbox"/> CO-APPLICANT	<input type="checkbox"/> CO-APPLICANT	<input type="checkbox"/> CO-APPLICANT
NAME OF INSTITUTION				
ADDRESS				
TELEPHONE				
ACCOUNT				
RSP, SSP, TD, GIC (\$)				
TOTAL (\$):	1)	2)	3)	4)

5. INFORMATION ON REAL ESTATE

N°	DESCRIPTION	PURCHASE PRICE (\$)	YEAR OF PURCHASE	HYPOTHEC ACCOUNT NO.	MATURITY	REGISTERED IN THE NAME OF:	TAX AMOUNT (\$)

6. THIRD PARTY DETERMINATION REQUIREMENT (under the Proceeds of Crime (Money Laundering) and Terrorist Financing Regulation)

Are you opening the product/account at the request of a person or entity other than the client?
 NO YES, Complete the information below (for an In-Trust account, answer the question without providing the information) and fax the duly completed and signed form to the SSEP – Control and Taxation (973) team at 514 284-4567 or 1 800 263-8674.

Name of third party (individual or company)						Phone No.	
Primary address (Civic No. and Street)		Apt. / Office No.	City	Province / State	Postal code / ZIP code	Country	
Date of birth (JJ-DD-YYYY)		Relationship between the client and the third party				Nature of business – reserved to 973	

EMPLOYER

Employment Status							
<input type="checkbox"/> Employed	<input type="checkbox"/> Self-employed	<input type="checkbox"/> Seasonal	<input type="checkbox"/> Student	<input type="checkbox"/> Unemployed	<input type="checkbox"/> Retired worker		
Occupation: refer to the Excel list							
Industry sectors				CWW dUjcb			
Name of employer					Employer's phone number		Ext.
Employer's address (No. and Street)		Apt. / Office No.	City	Province / State	Postal code / ZIP code	Country	

In addition, obtain the following information if the third party is a legal person:

Incorporation Certificate No.		Place of issuance of certificate (province/territory, state/country)
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7. ADDITIONAL INFORMATION

HAVE YOU BEEN OR ARE YOU SUBJECT TO THE VOLUNTARY DEPOSIT PROVISIONS?	<input type="checkbox"/> YES <input type="checkbox"/> NO
HAVE YOU BEEN OR ARE YOU SUBJECT TO THE PROVISIONS OF THE <i>BANKRUPTCY ACT</i> ?	<input type="checkbox"/> YES <input type="checkbox"/> NO
ARE THERE ANY JUDGMENTS AGAINST YOU?	<input type="checkbox"/> YES <input type="checkbox"/> NO

8. DECLARATIONS, CONSENT TO COLLECT, USE AND DIVULGATION OF PERSONAL INFORMATION AND SIGNATURES

CONSENT TO COLLECT, USE AND DIVULGATION PERSONAL INFORMATION

The Bank collects, uses and discloses my personal information in accordance with its privacy practices. These practices are further detailed in the Privacy Statement of the Bank and in the brochure called "Questions of Privacy", both of which are available online at <https://www.banquelaurentienne.ca/en/security.html>. Here are the key elements of these documents:

- a) **Personal Information:** In order to establish a relationship with me, and for the purposes described below, the Bank collects personal information that identifies me ("Personal Information"). The Personal Information collected by the Bank depends on the type of products or services I use and my personal situation, and can include, as the case may be:
- identification information, such as my name, date of birth, gender, personal identification numbers, marital status, addresses, e-mail addresses, telephone numbers and signature;
 - financial information, such as my income, credit history and transactions occurring through the Bank or other financial institutions;
 - employment information, such as my employer's name and my employment history.

Personal Information is mainly obtained from me when I provide this information in writing or orally, or as I use products or services (and generate a transaction history, for example). Personal Information can also be collected from other sources, as described below.

- b) **Collection of my Personal Information:** The Bank collects my Personal Information in order to establish a relationship with me and make use of this Personal Information in the context of its activities. The purposes for which my Personal Information is collected, used and disclosed include:
- verify my identity;
 - give me access to a product or service or allow me to buy or subscribe to such a product or service;
 - allow the Bank to deliver, manage and improve the products and services it provides me and contact me about them;
 - give me access to online services;
 - understand my financial situation and identify my needs, particularly to offer adequate financial and investment advice;
 - determine my eligibility for products and services;
 - carry on business with me;
 - protect me, the Bank and its clients from errors, omissions or fraud;
 - contact me about products and services I might find interesting from the Bank, its affiliates and other partners;
 - support risk and operational management at the Bank (including compliance with legal and regulatory requirements and communications with regulatory authorities);
 - perform analysis, particularly to understand the clients of the Bank and develop or customize products and services.

- c) **Third Parties:** For the purposes outlined above, the Bank is authorized to collect my Personal Information from third parties or disclose my Personal Information to third parties in the following cases:
- Credit and Overdraft Protection Products (Including Guarantees and Suretyships) Only:** Until full payment of any amount as may be owing to the Bank or until the product is closed, whichever is later, I authorize the Bank to collect and disclose information regarding my solvency or financial situation from and to legally authorized persons and, when applicable, any credit bureaus, any personal information agent, any person referred to in credit reports obtained, any financial institution, fiscal authorities, creditor, employer, public organizations, any mortgage/hypothecary insurer or any other person providing references, and authorize such persons to disclose the information requested. By granting this authorization, I authorize the Bank to receive my credit reports from the credit reporting agencies and to use those reports within the limits prescribed by the law, for the purposes of any credit request or overdraft protection, renewal, refinancing, or management related to an existing credit product. In order to allow the Bank to assess credit risks on an ongoing basis, I also authorize the Bank to request non-impact credit reports at any time it deems appropriate, and until full payment of any amount as may be owing to the Bank;
 - Hypothecary Loan Insurance Only:** I authorize the Bank to disclose my Personal Information to the hypothecary loan insurer (such as Canada Mortgage and Housing Corporation (CMHC) or Genworth Mortgage Insurance Company Canada (Genworth Canada)) to administer and manage the hypothecary loan insurance entered into with the Bank;
 - Product-Specific Insurance Only:** I authorize the Bank to disclose my Personal Information to any insurer of an insurance product to which you adhere or subscribe as an accessory to a product offered by the Bank in order to administer your insurance coverage;
 - I authorize the Bank to disclose my Personal Information to competent authorities in cases of fraud, inquiry or breach of any agreement or any statutory violation;
 - I authorize the Bank to disclose my Personal Information to other financial institutions when inter-bank communication is required to prevent or control fraud, during inquiries for breach of any agreement or any statutory violation;
 - I authorize the Bank to transfer my Personal Information to its employees, affiliates, agents, representatives and service providers acting on its behalf, who are bound to maintain the confidentiality of this information. The Bank's service providers provide services such as transactional, insurance, technology, document and material preparation, mailing/electronic mailings, courier, client management and service, document storage, record keeping, and cash logistics services;
 - I authorize the Bank to collect or disclose my Personal Information to third parties when authorized or required by law or with my consent;
 - With a view to benefiting from high-quality service and obtaining information about the financial products and services offered by the Bank, its affiliates (such as B2B Bank and LBC Financial Services Inc.) and its partners, I authorize the Bank to use my Personal Information, and to disclose my Personal Information to its affiliates and partners, for the purposes of the Bank, its affiliates and partners (i) providing me with promotional communications about products and services, including tailored communications such as pre-approved credit products, and (ii) sending me such marketing communications through various channels, including mail, telephone and electronic messages (e.g. e-mail, text message, social media messaging). I may revoke this authorization at any time by signalling this intention when signing this agreement, or in writing thereafter. The Bank will not refuse to provide the products and services described in this agreement, if I am entitled to them, even if I have revoked this authorization.

8. DECLARATIONS, CONSENT TO COLLECT, USE AND DIVULGATION OF PERSONAL INFORMATION AND SIGNATURES (continuation)

- d) **Assignment:** I acknowledge that the Bank may, at any time, without informing me or the commercial client, assign my products and services to any person. The assignee may be required to retain my personal information for a certain period of time in accordance with applicable laws.
- e) **Social Insurance Number:** I authorize the Bank to provide my social insurance number to the tax authorities, when required by law, in particular for reporting of income or the determination of residency status for income tax purposes. The Bank may also use my social insurance number for identification or data consolidation purposes. I may refuse usage for these purposes without the Bank refusing to provide the products and services described herein if I am entitled to them.
- f) **Personal Information Outside Canada:** If services are provided by the Bank or its service providers from a country other than Canada, or if data containing my Personal Information are moved and found in a country other than Canada, I understand that the Bank or its service providers may be required to disclose my Personal Information to authorities of the foreign jurisdiction pursuant to the applicable laws of that jurisdiction.
- g) **Personal Information Update:** When Personal Information is updated by me with regards to a specific product or service, such updated Personal Information shall be considered the most current information, and the Bank is authorized and may update its records accordingly for any other financial products and services I hold.
- h) **Right to Access my Personal Information:** The Bank allows me to access the information to which I am entitled by law and I understand that I may direct my request to the Bank's Client Requests team by phone at 514-284-3987 (Montreal area) or 1-877-803-3731 (toll-free). Fees may apply.
- i) **Information About Another Individual:** I confirm that before providing the Bank with Personal Information on behalf of another individual (for example, as the case may require, authorized owners, partners, general partners, special partners, members, settlors, beneficiaries, trustees, shareholders, directors, as well as signing officers, officers, representatives and users), I obtained the prior consent of that individual or I am otherwise legally authorized to provide such information. At the Bank's request, I will provide the required Personal Information after I receive, when applicable, the consent of any person acting on behalf of the commercial client, for the purposes identified in section b). The Personal Information obtained by the Bank will be used and disclosed in accordance with the Bank's privacy practices.

DECLARATIONS AND SIGNATURES

1. This Agreement may be signed in person, by fax or email. Each copy of this Agreement, whether signed by the parties in person, by fax or email, shall be deemed to be an original.
2. I certify that the information provided herein is true, accurate and complete in every respect and that I do not hold any other liabilities than those declared in these presents. Furthermore, I understand that the bank's decision will be based on the information contained in this application and/or on the surety's declaration. I also declare not having withheld any information which could otherwise influence the bank's decision.
3. I agree to the collection, use and disclosure of my Personal Information in accordance with the privacy practices of the Bank. These practices are further detailed herein. I understand that the Bank will need my prior consent for any further use or collection of Personal Information, or for any modification to the purposes for which my Personal Information is collected. I confirm that before providing Personal Information about any other individual, I have obtained the consent of that individual or I am otherwise authorized to provide such information.
4. Whenever the context so requires the singular number shall be interpreted as plural, and the masculine gender as feminine or neuter, and vice-versa.
5. Each co-applicant, where applicable, has the option of receiving separately any notice or communication required by the law. If no address for the co-applicant has been entered in section 1 hereof, in this case, the co-applicant consents that only one copy of the notices and communications concerning the loan be sent to the applicant's address indicated in this same section 1.A co-applicant may at any time request to receive the documents at another address by contacting his representative at the Bank, the Branch or the Bank's Telebanking center.

If my hypothecary loan or my mortgage loan is insured by the CMHC or other mortgage insurers, I and, if necessary, my surety or guarantor ("surety") acknowledge that the granting of the loan or any part thereof or approval for insurance by the mortgage insurer is not to be construed or relied upon by any surety and I as representing a confirmation of the value or condition of the underlying property, whether or not appraisals or inspections are carried out by or for the mortgage insurer; nor is it to be construed or relied upon by my surety and I as representing a confirmation of my surety or my ability to reimburse the loan.

DATE

APPLICANT

SURETY/GUARANTOR

CO-APPLICANT / SPOUSE