# PACIFIC & WESTERN BANK OF CANADA - CLIENT INFORMATION FORM

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| _____<br>**FIRST NAME OF DEPOSITOR** **MIDDLE** **LAST NAME**<br>_____<br>CIVIC ADDRESS PROVINCE POSTAL CODE<br>_____<br>RESIDENCY INFORMATION FOR TAXATION PURPOSES (Country and Province/State)<br>**TYPE OF VALID ID (not required for RSP's)** **REFERENCE NUMBER** **PLACE OF ISSUE**<br>1._____<br>2._____ | (_____)_____<br>HOME PHONE NUMBER<br>(_____)_____<br>BUSINESS PHONE NUMBER<br>_____<br>SOCIAL INSURANCE NUMBER<br>_____<br>DATE OF BIRTH (dd/mmm/yy)<br>_____<br>PRINC. BUS. OR OCCUPATION |
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## PEFP Determination (Not Required for RSP's)

By law we are obligated to determine if you are a politically exposed foreign person (PEFP).
A PEFP is an individual who holds, or has ever held, one of the following offices or positions in or on behalf of a **foreign country**:
a head of state or government; a member of the executive council of government or member of a legislature; a deputy minister (or equivalent); an ambassador or an ambassador's attaché; a military general or higher rank); a president of a state-owned company or bank; a head of a government agency; a judge; or, a leader or president of a political party in a legislature.
A PEFP also includes the following family members of the individual described above:
mother or father; child; spouse or common-law partner; spouse's or common-law partner's mother or father; brother, sister, half-brother or half-sister (that is, any other child of the individual's mother or father).

An individual or family member described above is a PEFP regardless of their citizenship, residence status or birth place.

Are you a PEFP, as defined above? ☐ Yes ☐ No If yes, please specify :_____

## Consent to the Collection, Use and Disclosure of Personal Information

By signing this Client Information Form below, you consent to your deposit broker collecting your personal information contained on this Client Information Form and from time to time providing this information to one or more financial institutions for the sole purpose of transacting deposit business on your behalf. You also consent to the use, retention and disclosure of your personal information by such financial institutions, as is reasonably required by them, in connection with the establishment and maintenance of an account in your name, to meet legal and regulatory requirements, and for statistical, audit and security purposes.

I have read the above paragraph and hereby give my consent to the collection, use and disclosure of the personal information as described therein.

I confirm that the information provided is true and accurate and I agree to make the deposit broker aware of any changes to the personal information contained on this form. **I further authorize the deposit broker named below to accept my verbal instructions.**

_____ _____ _____

Signature–Primary Account Holder Signature–Secondary Account Holder Date

## Third Party Declaration

Is this deposit being purchased on behalf of a third party or is the account being opened by or on behalf of a third party? ☐ Yes ☐ No If yes, please complete the following:

Other Party's Name: Other Party's Date of Birth (dd/mm/yy): Other Party's Address:

_____ _____ _____

Other Party's Principal Business or Occupation: _____

Other Party's Relationship to Account Holder: _____

**I, as authorized representative of the deposit broker, certify that I i) have personally met with the authorized signatories listed above, ii) have viewed the original identification records listed above and verified that such identification is original and valid, iii) having made reasonable inquiries, have no reason to believe that the client is acting on behalf of a third party or, if so, have provided the required third party information, iv) having made reasonable inquiries, believe the correct PEFP determination has been made, and v) have witnessed the individual(s) sign this document.**

Deposit Broker Name/Number: _____

Representative Name/Number: _____Signature:_____ Date:_____