

This form enables you to designate other parties to your contract, to add them or to modify the choices that you have made upon subscription, as appropriate. Please complete only the sections in which you want to make or modify a designation. The choices that you make may have an impact on your contract, should one of the parties therein die. Please contact your financial security advisor for estate planning advice tailored to your personal needs. For more details, refer to your Information Folder. This form is applicable to the regular product (BRA1620 Information Folder) but is not applicable to the Beneva Guaranteed Income product. **If you have specific instructions that you'd like for this estate planning proposal (based on your plan), please indicate them in Section 4.** A contingent investor (subrogated in Quebec) and/or successor annuitant cannot be designated as a primary, continuing or contingent beneficiary (subrogated in Quebec).

1. Information About the Investor

This information must be similar to the information provided in the Application form.

Last Name		First Name	
Last Name of the co-Investor (if applicable)		First Name	
Contract No: _____ if the change concerns only one plan.			
OR			
Investor No: _____ if you want to apply the change to all your plans.			

2. Estate Planning

Select the plan that corresponds to the contract in Section 1.

NRSP – Contingent Investor (Subrogated in Quebec) AND Successor Annuitant

If the investor is a legal person, then only the successor annuitant applies. Upon the death of the annuitant, the contract remains in force.

Last Name		First Name		Social Insurance Number	
Street Number (if address is different from investor's)		Street		Apt.	
City		Province		Postal Code	
Telephone (home)		Telephone (office)		Ext.	
Email		Sex: <input type="checkbox"/> F <input type="checkbox"/> M		Langue: <input type="checkbox"/> English <input type="checkbox"/> French	

TFSA – Contingent Investor (Subrogated in Quebec)

Only the spouse may be designated. Upon the death of the investor, the contract remains in force.

Last Name		First Name		Social Insurance Number	
Street Number (if address is different from investor's)		Street		Apt.	
City		Province		Postal Code	
Telephone (home)		Telephone (office)		Ext.	
Email		Sex: <input type="checkbox"/> F <input type="checkbox"/> M		Langue: <input type="checkbox"/> English <input type="checkbox"/> French	

RRIF – Successor Annuitant

Only the spouse may be designated. Upon the death of the annuitant, the contract remains in force.

Last Name		First Name		Social Insurance Number	
Street Number (if address is different from investor's)		Street		Apt.	
City		Province		Postal Code	
Telephone (home)		Telephone (office)		Ext.	
Email		Sex: <input type="checkbox"/> F <input type="checkbox"/> M		Langue: <input type="checkbox"/> English <input type="checkbox"/> French	

3. Change of Beneficiary

Revocable: You may change the beneficiary designation at any time upon written request.

Irrevocable: You may change the beneficiary designation only if the following documents are provided

- 1) The written consent of the current irrevocable beneficiary(ies) (see section 5 of this form)
- 2) The divorce or separation decree (in the case where the current irrevocable beneficiary is the ex-spouse)
- 3) The death certificate (in the case where the current irrevocable beneficiary is deceased)

A minor child irrevocably designated cannot modify the irrevocable nature of the designation until he reaches majority. Civil unions are considered the same as marriage when contracted in compliance with prescribed rules before a competent officiant and registered with the provincial authorities.

Primary Beneficiary(ies)

Should no choice be made, the beneficiary designation is revocable, except in Quebec, where the designation of the married or civil union spouse as beneficiary is irrevocable, unless the "revocable" box has been checked.

Should the beneficiary be named irrevocably, he will be required to consent to any future beneficiary designation modification and for any withdrawal of sums.

Last Name, First Name	Relation to Annuitant (or in Quebec, relation to investor)			%	Revocability of Primary Beneficiary		Date of Birth (if minor)
	Spouse	Un-Married Spouse	Other		Rev.	Irrev.	
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Y Y Y Y M M D D
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Y Y Y Y M M D D
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Y Y Y Y M M D D

Continuing Beneficiary(ies) or Contingent Beneficiary(ies)

Continuing or Contingent Beneficiary designation is optional. Check only one box and complete the appended table.

- Continuing Beneficiary(ies)** – Upon the death of a primary beneficiary, the associated continuing beneficiary replaces him or her. A continuing beneficiary may replace one or several primary beneficiaries.
- Contingent Beneficiary(ies) (Subrogated in Quebec)** – A contingent beneficiary has no rights unless all primary beneficiaries are deceased.

Last Name, First Name	Date of Birth (if minor)	% ¹	Complete only if you designate a continuing beneficiary(ies) Last Name, First Name of Primary Beneficiary ²
	Y Y Y Y M M D D		
	Y Y Y Y M M D D		
	Y Y Y Y M M D D		

¹ The sum of the percentages of each continuing beneficiary named to replace a primary beneficiary must total 100%.

² If you designate one or more contingent beneficiaries and have entered the information in this section, it will not be considered.

Information About the Trustee (Does not apply in Quebec.)

Complete this section only if the beneficiary is a minor. In this situation, a trustee must be appointed to receive all payments until the designated beneficiary reaches the age of majority. In Quebec, the payment will be made out to a beneficiary who is a minor but sent to their parent(s) or legal guardian.

Name of Trustee

Relation to Trustee

4. Additional Instructions

5. Consent of the Current Irrevocable Beneficiary (if applicable)

I, _____, designated as irrevocable beneficiary under the contract identified in section 1 of this form, give my consent to the designation(s), addition(s) or modification(s) requested above.

X

Current Irrevocable Beneficiary's Signature

| Y | Y | Y | Y | M | M | D | D |

Date

6. Signature of Investor

I authorize Beneva to carry out the designation(s), addition(s) or modification(s) requested. I understand that the validity of the new designation or the change of beneficiary shall be subject to applicable legislation.

X

Signature of Investor

| Y | Y | Y | Y | M | M | D | D |

Date

X

Signature of co-investor (where applicable)

| Y | Y | Y | Y | M | M | D | D |

Date

Protecting your personal information is a priority for Beneva. To find out more about our practices, please consult the *Personal Information Protection Statement* located at beneva.ca.