



## DSC & TRANSFER FEE REIMBURSEMENT REQUEST FORM

This form is to be used where the policy owner will be reimbursed by the advisor for the Deferred Sales Charge (“DSC”) and/or transfer fees incurred when transferring funds from another financial institution to an Equitable Life® contract.

<b>1. Contract details</b>	
Name of Policy Owner (first, last)	
Name of Joint Policy Owner (first, last)	
Policy Number	Contract Registration Type (RRSP, Non-registered, etc.)
Name of Prior Financial Institution	Contract Registration Type (RRSP, Non-registered, etc.)

<b>2. Instructions for investment of DSC and/or transfer fee reimbursement</b>		
<p>The minimum deposit is \$50 per fund.</p> <p>Maximum age restrictions may apply to deposits.</p> <p> <input type="checkbox"/> Invest according to the instructions below           <span style="margin-left: 150px;"><input type="checkbox"/> Invest according to the instructions on file</span> </p> <p>Pivotal Select: Deposits may be made into No Load or No Load Chargeback sales charge options only.            Refer to <a href="#">Pivotal Select Segregated Fund Codes, MERs and Guarantee Fees Form #375SEL</a>.</p> <p>Legacy segregated fund products:            Refer to <a href="#">Personal Investment Portfolio and Pivotal Solutions segregated fund codes Form #375ANN</a>.</p>		
<b>Equitable Life segregated fund name</b>	<b>Fund code</b>	<b>Amount</b>
		\$
		\$
		\$
		\$



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### Important tax information:

- If your policy is registered, the reimbursement amount is not considered income and will not be treated as a registered contribution.
- If your policy is non-registered, the reimbursement amount is considered income under section 12(1) (x) of the Income Tax Act (Canada). It is your responsibility to report this income for personal income tax purposes.

**Note:** The above is based on current Canada Revenue Agency requirements, which are subject to change without notice.

### 3. Terms and conditions

I\* have redeemed part or all of my holdings from the financial institution indicated in **Section 1**. The redemption resulted in DSCs and/or transfer fees. My advisor has reimbursed me for the amount of the fees, and I want this amount deposited to my Equitable Life policy. I understand that my advisor will earn commission from Equitable Life.

I agree that I will be subject to the terms of the Equitable Life policy.

If this is not a registered investment, I understand that the redemption may result in a deemed disposition and could trigger a capital gain/loss. **Equitable Life reserves the right to decline this request.**

\*For jointly owned policies "I" refers to both owners of the contract.

### 4. Client signatures

Policy Owner signature

Joint Policy Owner signature

Date

### 5. Advisor declaration and acknowledgement

I have attached the following requirements:

- Transaction confirmation from the prior financial institution showing the deferred sales charges and/or transfer fees
- Cheque payable to Equitable Life of Canada in the amount of the reimbursement

Advisor Name

Advisor Signature

Date