Equitable™

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LIMITED TRADING AUTHORIZATION - SAVINGS AND RETIREMENT

Use this form for all Savings and Retirement contracts if the original application did not include Limited Trading Authorization.

Contract number(s)	
Name of contract owner	Name of joint contract owner (if applicable)
Name of advisor	Advisor's code and branch number

I/We authorize Equitable® to act on my/our instructions provided in writing by my/our advisor. This authorization includes but is not limited to:

- Modification of investment instructions
- Reinvestment of maturing funds
- Partial withdrawals
- Reset of maturity and death benefit guarantees
- Purchases
- Rate guarantees
- Switches (not Including Change of Sales Charge Option)
- Scheduled withdrawal plans (SWP) (stopping, restarting, changing existing SWP instructions)
- Pre-authorized debit (PAD) (stopping, restarting, changing existing PAD instructions)

I/We understand and agree that:

a) Written instructions provided by my/our advisor to Equitable under this authorization will be accepted as if I/we had provided signed written instructions directly to Equitable. I/we release Equitable from any liability, losses, damages, costs, charges and expenses (including fees) that may result from acting on the instructions;

b) Equitable will act on these instructions, which could result in tax consequences, transaction fees and investment losses, for which I am responsible;

c) I have set up my confidential online Equitable Client Access account;

d) I should keep a record of my instructions to my advisor and ensure that they have been carried out appropriately by reviewing confirmations and statements, which will be posted to my confidential online Equitable Client Access account;

e) This Limited Trading Authorization will expire immediately upon: i) Equitable receiving my written notice cancelling it, changing my advisor or signing a new authorization; ii) Equitable receiving written notice of my mental incapacity or death; iii) termination of the advisor's contract with Equitable; or, iv) Equitable sending me notice of its termination; and,

f) Equitable reserves the right to decline instructions submitted by the advisor based on our administrative rules.

Signed at _____ _____ this _____ of _____ 20_____.
          (city)   (province)   (day)   (month)

Signature of Contract Owner	Signature of Joint Contract Owner (if applicable)
Signature of Advisor	