BMO Wealth Management
BMO InvestorLine

adviceDirect®

PRE-AUTHORIZED TAX-FREE SAVINGS ACCOUNT CONTRIBUTION ENROLMENT FORM

Reset Form

To ensure continuous access to your account(s), please submit the fully completed, dated, and signed original.

A FOR PERSONAL ACCOUNTS

For Personal Accounts Please Check (✓) One

- ☐ This is my first enrolment
- ☐ I wish to cancel my enrolment
- ☐ I wish to change my banking information

By completing this authorization, the client is authorizing BMO InvestorLine Inc. to automatically withdraw funds from the client's account at the financial institution listed below (the "Financial Institution") for the purposes of a pre-authorized contribution to a BMO InvestorLine Tax-Free Savings Account.

B PERSONAL INFORMATION

Title _____ Last Name _____

First Name _____ Int. _____

Home Address (number, street) _____ Suite Number _____

City or Town _____ Province _____ Postal Code _____

BMO InvestorLine Account Number _____ Enrolment Date (YY/MM/DD) _____

C BANKING INFORMATION

Name of Bank or other Financial Institution _____

Address (number, street) _____ Suite Number _____

City or Town _____ Province _____ Postal Code _____

Name(s) of Account Holder(s) _____

Transit Number _____ Institution Number _____

Account Number _____

Please check options:

Frequency of Contributions:

- ☐ Weekly
- ☐ Monthly
- ☐ Semi-annually
- ☐ Semi-monthly on the 15th and on the last business day of the month
- ☐ Annually
- ☐ Quarterly

Periodic Contribution Amount: (minimum $100.00 with increments of $50.00) _____

Start Date of Contribution (YY/MM/DD) _____

®Registered trade-marks of Bank of Montreal, used under licence.
BMO InvestorLine Inc. is a wholly owned subsidiary of Bank of Montreal.
Member – Canadian Investor Protection Fund and Member of the Investment Industry Regulatory Organization of Canada.

BMO Wealth Management
BMO InvestorLine

D A FEW DETAILS

1) In this Authorization "I", " me" and " my" refer to each client who signs below.

2) I agree to participate in this Pre-Authorized Tax-Free Savings Deposit and I authorize BMO InvestorLine Inc. to draw a debit, in paper, electronic or other form (a "Pre-Authorized Debit"), on my account indicated above (the"Originating Account") under terms and conditions agreed to by me with BMO InvestorLine Inc.

3) I may revoke this Authorization at any time by delivering a written notice of revocation to BMO InvestorLine Inc. I agree that revocation of this Authorization does not terminate any contract for goods or services that exists between me and BMO InvestorLine Inc. This authorization applies only to the method of payment and does not have any bearing on any contract for goods and services exchanged.

4) I agree that the Financial Institution is not required to verify that any Pre-Authorized Debit has been drawn in accordance with this Authorization including the amount, frequency and fulfillment of purpose of any Pre-Authorized Debit.

5) I agree that the amount may be increased/decreased at a future date as agreed to in writing by me. BMO InvestorLine Inc. will, to the best of its ability, advise me in writing of the revised amount at least 30 days in advance of its date.

6) I may dispute a Pre-Authorized Debit (a "Disputed Debit") by providing a signed declaration to the Financial Institution under the following conditions:

i) An authorization was never provided to BMO InvestorLine Inc.;

ii)The Pre-Authorized Debit was not drawn in accordance with this Authorization, including failure to provide prior in case of variable amounts;

iii) This authorization was canceled;

iv) The Pre-Authorized Debit was posted to the wrong account due to invalid or incorrect information supplied by BMO InvestorLine Inc. On receipt of a written declaration from me that condition (i), (ii), (iii) or (iv) occurred, the Financial Institution will immediately reimburse me for any Disputed Debit up to 90 days after the date the Disputed Debit was posted in my account. I agree that, after this 90 day period, I shall resolve any dispute that I may have concerning a Pre-Authorized Debit solely with BMO InvestorLine Inc.

7) I agree that delivery of this Authorization to BMO InvestorLine Inc. constitutes delivery by me to the Financial Institution.

8) I will inform BMO InvestorLine Inc., in writing, of any change in the Originating Account information provided in this Authorization prior to the next due date of the Pre-Authorized Debit.

9) I warrant that all persons whose signatures are required to sign on the Originating Account have signed this Authorization below.

10) I understand and agree to the foregoing terms and conditions and I acknowledge receipt of a copy of this Authorization.

11) I agree to reimburse BMO InvestorLine Inc. for any charges paid by BMO InvestorLine Inc. to its Financial Institution as a result of the amount of any Pre-Authorized Debit returned to the Financial Institution due to funds.

12) Applicable to the Province of Quebec only: It is the express wish of the parties that this Authorization and any related documents be drawn up and executed in English. Les parties conviennent que la présente autorisation et tous les documents s'y rattachant soient rédigés et signés en anglais.

13) I am aware of my TFSA contribution room limit and the penalty tax of 1% per month that applies to an over-contribution. I am aware that the amount of contributions I make to my TFSA at BMO InvestorLine will be reported annually to Canada Revenue Agency, which will enable CRA to calculate whether I have made an over-contribution. I recognize it is my responsibility to be aware of my personal tax situation and to obtain such legal and tax advice as I believe necessary. I hereby accept any risks or penalties that may arise as a result of contributions to my TFSA.

Applicant Name: _____

Applicant's Signature: _____

Date (YY/MM/DD): _____