# Form 33-109F1 Notice of Termination of Registered Individuals and Permitted Individuals (section 4.2)

## **General Instructions**

Complete and submit this form to notify the relevant regulator(s) or, in Québec, the securities regulatory authority, or self-regulatory organization (SRO) that a registered individual or permitted person has left their sponsoring firm.

## **Terms**

In this form, "cessation date" (or "effective date of termination") means the first day on which an individual ceased to have authority to act as a registered individual on behalf of their sponsoring firm or ceased to be a permitted individual of their sponsoring firm, because of the end of, or a change in, the individual's employment, partnership, or agency relationship with the firm;

## How to submit the form

Submit this form at the National Registration Database (NRD) website in NRD format at www.nrd.ca.

If you are relying on the temporary hardship exemption in section 5.1 of National Instrument 31-102 [National Registration Database], you may submit this form in a format other than NRD format.

## When to submit the form

You must submit the responses to Item 1, Item 2, Item 3 and Item 4 within five business days of the effective date of termination.

If you are required to complete Item 5, you must submit those responses within 30 days of the termination date. If you are submitting the responses to Item 5, in NRD format, after Items 1 to 4 have been submitted at NRD, use the NRD submission type called "Update/Correct Termination Information" to complete Item 5 of this form.

| Item 1 | 1 Terminating firm   |                          |
|--------|--|--------------------------|
| 1.     | Name   |                          |
| 2.     | NRD number   |                          |
| Item 2 | 2 Terminated individual  |                          |
| 1.     | Name   |                          |
| 2.     | NRD number   |                          |
| Item 3 | 3 Business location of the terminated individual   |                          |
| 1.     | Address  |                          |
| 2.     | NRD number   |                          |
| Item 4 | 4 Date and reason for termination  |                          |
| 1.     | Cessation date / Effective date of termination (YYYY/MM/DD)  |                          |
|        | This is the first day that the individual ceased to have authority to act in a registerab the firm or ceased to be a permitted individual. | le capacity on behalf of |
| 2.     | Reason for termination / cessation (check one):  |                          |
|        | Resigned - voluntary   |                          |
|        | Resigned - at the firm's request   |                          |

|              | Dismissed in good standing   |   |          |       |
|--------------|--|---|----------|-------|
|              | Dismissed for cause  |   |          |       |
|              | Completed temporary employment contract  |   |          |       |
|              | Retired  |   |          |       |
|              | Deceased   |   |          |       |
|              | Other  |   |          |       |
| Item 5       | Details about the termination  |   |          |       |
|              | ete Item 5 only if the individual resigned, was dation under Item 4.2 was "Other". In the space I state the reason(s) for the resignation, dismis provide details if the answer to any of the follows:   | pelow: sal or "Other" reason for termination and  | he reaso | n for |
| [For NI<br>□ | RD Format only:] This information will be disclosed within 30 da   | ays of the effective date of termination  |          |       |
|              | Not applicable: completed temporary employr  | ment contract, retired or deceased  |          |       |
| Answe        | r the following questions to the best of the firm'   | s knowledge.  |          |       |
|              | In the past 12 months:   |   | Yes      | No    |
| 1.           | Was the individual charged with any criminal   | offence?  |          |       |
| 2.           | Was the individual the subject of any investigation of any investigation of the subject of the s | ation by any securities or  |          |       |
| 3.           | Was the individual subject to any significant in firm or at any affiliate of the firm related to the   |   |          |       |
| 4.           | Were there any written complaints, civil claims against the individual or against the firm about activities that occurred while the individual was individual authorized to act on behalf of the firm  | t the individual's securities-related as registered or a permitted  |          |       |
| 5.           |  |   |          |       |
| 6.           | Does the individual have any undischarged fir  | -   | Ш        | Ш     |
| 0.           | Has the firm or any affiliate of the firm suffere its reputation as a result of the individual's act   |   |          |       |
| 7.           | Did the firm or any affiliate of the firm investig material violations of fiduciary duties, regulate policies and procedures of the firm or any affil making unsuitable trades or investment reconclient money or securities, hiding losses from money laundering, deliberately making false rundisclosed outside business activity.   | ory requirements or the compliance liate of the firm? Examples include nmendations, stealing or borrowing clients, forging client signatures, |          |       |
| 8.           | Did the individual repeatedly fail to follow comprocedures of the firm or any affiliate of the firm  |   |          |       |

| 9.   | Did the individual engage in discretionary management of client accounts or otherwise engage in registerable activity without appropriate registration or without the firm's authorization? |              |            |  |  |
|--|---|--------------|------------|--|--|
| Reas   | sons/Details:   |              |            |  |  |
| Item   | 6 Notice of collection and use of personal information  |              |            |  |  |
| The personal information required under this form is collected on behalf of, and used by, the securities regulatory authorities in the jurisdictions set out in Schedule A to administer and enforce certain provisions of their securities legislation or derivatives legislation or both.  |   |              |            |  |  |
|  | personal information required under this form is also collected by and used by the SROs<br>Iminister and enforce their respective by-laws, regulations, rules, rulings and policies.        | set out in S | Schedule A |  |  |
| By submitting this form, the individual consents to the collection by the securities regulatory authorities or applicable SRO of this personal information, and any police records, records from other government or non-governmental regulators or SROs, credit records and employment records about the individual that the securities regulatory authorities or applicable SRO may need to complete their review of the information submitted in this form relating to the individual's continued fitness for registration or approval, if applicable, in accordance with the legal authority of the securities regulatory authorities while the individual is registered with or approved by it as the case may be. Securities regulatory authorities or SROs may contact government and private bodies or agencies, individuals, corporations and other organizations for information about the individual. |   |              |            |  |  |
| If you have any questions about the collection and use of this information, contact the securities regulatory authorities or applicable SRO in any jurisdiction in which the required information is submitted. See Schedule A for details. In Québec, you can also contact the Commission d'accès à l'information at 1-888-528-7741 or visit its website at www.cai.gouv.qc.ca.   |   |              |            |  |  |
| Item   | 7 Warning   |              |            |  |  |
|  | an offence under securities legislation and/or derivatives legislation, including constant to give false or misleading information on this form.  | mmodity fu   | ıtures     |  |  |
| Item   | 8 Certification   |              |            |  |  |
| Cert   | ification-NRD format:   |              |            |  |  |
|  | I am making this submission as agent for the firm. By checking this box, I certify that with all of the information on this form.   | the firm pro | ovided me  |  |  |
| Cert   | ification-Format other than NRD format:   |              |            |  |  |
| By signing below, I certify to the regulator or, in Québec, the securities regulatory authority, in each jurisdiction where I am submitting this form for the firm, either directly or through the principal regulator, that:  |   |              |            |  |  |
|  | have read this form and understand the questions, and all of the information provided on this form is true and complete.  |              |            |  |  |
| Nam  | e of firm   |              |            |  |  |
| Name of authorized signing officer or partner  |   |              |            |  |  |
| Title of authorized signing officer or partner   |   |              |            |  |  |
| Signature of authorized signing officer or partner   |   |              |            |  |  |
| Date signed(YYYY/MM/DD)  |   |              |            |  |  |

# Schedule A Contact information for Notice of collection and use of personal information

### Alberta

Alberta Securities Commission, 4th Floor, 300 - 5th Avenue SW Calgary, AB T2P 3C4 Attention: Information Officer

Attention: Information Office Telephone: (403) 355-4151

## **British Columbia**

British Columbia Securities Commission P.O. Box 10142, Pacific Centre 701 West Georgia Street Vancouver, BC V7Y 1L2

Attention: Freedom of Information Officer Telephone: (604) 899-6500 or (800) 373-6393

## Manitoba

The Manitoba Securities Commission 500 - 400 St. Mary Avenue Winnipeg, MB R3C 4K5 Attention: Director of Registrations Telephone (204) 945-2548 Fax (204) 945-0330

## **New Brunswick**

New Brunswick Securities Commission Suite 300, 85 Charlotte Street Saint John, NB E2L 2J2 Attention: Director, Regulatory Affairs Telephone: (506) 658-3060

# **Newfoundland and Labrador**

Securities NL Financial Services Regulation Division Department of Government Services P.O. Box 8700, 2nd Floor, West Block Confederation Building St. John's, NL A1B 4J6

Attention: Manager of Registrations

Tel: (709) 729-5661

## **Nova Scotia**

Nova Scotia Securities Commission 2nd Floor, Joseph Howe Building 1690 Hollis Street P.O. Box 458 Halifax, NS B3J 2P8

Attention: Deputy Director, Capital Markets

Telephone: (902) 424-7768

# **Northwest Territories**

Government of the Northwest Territories P.O. Box 1320 Yellowknife, NWT X1A 2L9

reliowkille, NVVI XIA 2L9

Attention: Deputy Superintendent of Securities

Telephone: (867) 920-8984

### Nunavut

Legal Registries Division
Department of Justice
Government of Nunavut
P.O. Box 1000 Station 570
Igaluit, NU X0A 0H0

Attention: Deputy Registrar of Securities

Telephone: (867) 975-6590

## Ontario

Ontario Securities Commission Suite 1903, Box 55 20 Queen Street West Toronto, ON M5H 3S8 Attention: FOI Coordinator Telephone: (416) 593-8314

## **Prince Edward Island**

Securities Registry
Office of the Attorney General B Consumer, Corporate
and Insurance Services Division
P.O. Box 2000

Charlottetown, PE C1A 7N8

Attention: Deputy Registrar of Securities

Telephone: (902) 368-6288

#### Québec

Autorité des marchés financiers 800, square Victoria, 22e étage C.P. 246, tour de la Bourse Montréal (Québec) H4Z 1G3

Attention: Responsable de l'accès à l'information

Telephone: (514) 395-0337 or (877) 525-0337 (in Québec)

# Saskatchewan

Saskatchewan Financial Services Commission Suite 601, 1919 Saskatchewan Drive Regina, SK S4P 4H2

Attention: Director

Telephone: (306) 787-5842

# Yukon

Yukon Securities Office Department of Community Services P.O. Box 2703 C-6 Whitehorse, YT Y1A 2C6

Attention: Superintendent of Securities

Telephone: (867) 667-5225

## Self-regulatory organization

Investment Industry Regulatory Organization of Canada 121 King Street West, Suite 1600 Toronto. Ontario M5H 3T9

Attention: Privacy Officer Telephone: (416) 364-6133 E-mail: PrivacyOfficer@iiroc.ca