



for Registered Retirement Savings Plan (RRSP)
Registered Retirement Income Fund (RRIF)

Client Name:

Account Number:

Registered Retirement Savings Plan (RRSP)

Please accept this fax as my authorization for:

a partial de-registration in the amount of \$_____ .00, gross (pre-tax).

There is a \$25.00 + GST fee charged per partial withdrawal

a full de-registration of my RRSP. This fax is my authorization to redeem **all** assets in my RRSP in order to fully de-register my plan.

There is a \$125.00 + GST fee charged for a full de-registration

Registered Retirement Income Plan (RRIF)

Please accept this fax as my authorization for:

a withdrawal in excess of my minimum annual RRIF payment in the amount of \$_____ .00, gross (pre-tax).

a full de-registration of my RRIF. This fax is my authorization to redeem **all** assets in my RRIF, in order to fully de-register my plan.

There is a \$125.00 + GST fee charged for a full de-registration

I am fully aware of any tax consequences and the following withholding taxes, where applicable:

Amount of Partial Withdrawal or De-registration	Federal except Quebec	Quebec		
		Federal	*Provincial	Total Quebec
Under \$5,000	10%	5%	16%	21%
\$5,001 - \$15,000	20%	10%	16%	26%
\$15,001 and over	30%	15%	16%	31%

*Subject to change

Please send the funds to:

- my Bank of Nova Scotia Account, on file
- the address on my account
- my regular (cash/margin) trading account number _____

CLIENT SIGNATURE _____

DATE _____

Fax: 1 800 569-9470

or

Mailing Address:

ScotiaMcLeod Direct Investing
Scotia Plaza ATTN: RRSP ADMINISTRATOR
5th Floor, 40 King St. W., Toronto ON M5H 1H1