

Account Update Form

Please return the completed form to:

HSBC InvestDirect
Suite 102 – 1725 16th Avenue, Box #5
Richmond Hill, ON L4B 4C6

List account number(s) to be updated

This form is updating (check all that apply): Name Change *(Supporting Document Required) Personal Information Marital Status
 Spousal Information Employment and Financial Information Insider and Other Information

Account Holder's Name

Title: Mr. Mrs. Miss Ms. Dr.

First Name (legal)

Middle Name (legal)

Last Name (legal)

Account Holder's Profile Information

Personal Information

Home Tel. # Business Tel. # (and extension)

Mobile Tel. # Email Address

(check all that apply) Change Home Address Change Mailing Address

Country of Residence Citizenship (list all countries)

Residence Address (P.O. Boxes, G.D. or C/O not accepted)

City Province Postal Code

Date of Birth (MM/DD/YYYY) Social Insurance Number

Marital Status

Married* Single Divorced Separated

Widowed Common Law* No. of Dependents: _____

*Please complete the Spousal Information below

Spousal Information

Mr. Mrs. Miss Ms. Dr.

Spouse's Full Name (legal)

Spouse's Employer's Name

Spouse's Occupation / Position

Type of Business

Employment and Financial Information

Employed Self Employed Student Not Working*
 Retired* Homemaker* *(please provide previous employment)

Employer's Name

Type of Business

Occupation/Position Years with Employer

Employer's Address

City Province Postal Code

Current Annual Income

Net Liquid Assets* + Net Fixed Assets** = Total Net Worth

* Cash & Securities less loans outstanding

** Fixed assets less liabilities outstanding against fixed assets

Insider and Other Information

1. Are you, your spouse or anyone you reside with employed by a securities dealer, IIROC Member firm, Stock Exchange or member of a Stock Exchange? Yes No
If yes, please state the name of the firm:
2. Are you, your spouse or anyone you reside with the CEO, CFO, COO or a Director of a publicly traded company ("a reporting issuer")? Yes No
3. Are you, your spouse or anyone you reside with the CEO, COO or CFO of a major subsidiary of a reporting issuer? (Major subsidiary is defined as a subsidiary of an issuer whose assets or revenue comprise 30% of the consolidated assets or revenue of the issuer) Yes No
4. Are you, your spouse or anyone you reside with a Significant Shareholder of a reporting issuer? In other words, do you, your spouse or anyone you reside with hold more than 10% of the voting rights of the issuer's outstanding voting securities, including any convertible securities that are convertible within 60 days that would put you over the 10% limit? Yes No
5. Are you, your spouse or anyone you reside with a control person (holding more than 20%) in a reporting issuer's outstanding voting securities? Yes No
6. Are you, your spouse or anyone you reside with a director or CEO, COO or CFO of a management company that provides significant management or administrative services to a reporting issuer or a major subsidiary of a reporting issuer? Yes No
7. Even if questions 2 to 6 above do not apply, do you, your spouse or anyone you reside with receive or have access to non-public information of a reporting issuer given the nature of the employment (i.e., finance, technology)? Yes No
8. Do you, your spouse or anyone you reside with exercise "significant power or influence" over the decisions of a reporting issuer? Yes No
9. Name any reporting issuers (including symbol) to which a "Yes" answer applies on questions 2 to 8 above:
10. Other than the applicant, will the account be used for the benefit of a third party or someone else? Yes No
11. Are you (or any members of your immediate family) currently, or have you (or any members of your immediate family) in the past, been employed in any of the following positions: Yes No

If yes, check all applicable boxes:

- | | |
|--|--|
| <input type="checkbox"/> a head of state or government; | <input type="checkbox"/> a president of a state owned company or bank; |
| <input type="checkbox"/> a member of the executive council of government or member of legislature; | <input type="checkbox"/> a head of a government agency; |
| <input type="checkbox"/> a deputy minister (or equivalent); | <input type="checkbox"/> a federal judge; or |
| <input type="checkbox"/> an ambassador or an ambassador's attaché or counselor; | <input type="checkbox"/> a leader or president of a political party in a legislature |

If answered yes to question 11, please indicate the details of the person(s) below:

| Person Full Name (legal) | Relationship to the account holder(s) | Length in Position (From/To) |
|--------------------------|---------------------------------------|------------------------------|
|--------------------------|---------------------------------------|------------------------------|

Description

(continued)

Account Holder's Agreement

You agree that the terms and conditions of your existing Client Account Agreement remain in effect. Should you wish to review the text of the document, we would be pleased to accommodate your request. You certify that the information provided by you in this document is true and complete. You also agree to advise us immediately of any material change in the information. An electronic version of the Client Terms and Conditions is available at www.hsbc.ca/investdirect-terms, or a paper copy may be requested by contacting HSBC InvestDirect at 1-800-760-1180.

Account Holder's Signature

Account Holder's Name (please print)

Date (MM/DD/ YYYY)

Internal Use Section

Authorized Officer Signature

Date (MM/DD/ YYYY)