

Elite or Elite XL Investment Program RRSP to RRIF Conversion

Throughout this form, "Empire Life" means The Empire Life Insurance Company.

This form may only be used to convert a registered Elite Investment Program plan issued after September 1, 1999 or Elite XL Investment Program plan issued after April 27, 1998 to a Registered Retirement Income Fund.

Complete a new Elite or Elite XL Investment Program application to convert any other registered plan to an Elite or Elite XL RRIF.

1	Owner		
	First Name:	Last Name:	
2	Conversion Details		
	Existing Policy number <input style="width: 150px;" type="text"/> <input type="radio"/> Elite or <input type="radio"/> Elite XL Investment Program		
	If converting locked-in funds (under pension legislation): PLEASE PROVIDE COPY OF PROOF OF AGE (if not previously submitted)		
	Plan Type: <input type="radio"/> Life Income Fund (LIF)		
	<input type="radio"/> Prescribed Retirement Income Fund (Saskatchewan only)		
	<input type="radio"/> Locked-In Retirement Income Fund (LRIF)		
	Do you have a Spouse or Common-law partner as defined in the pension legislation governing this policy?		<input type="radio"/> Yes <input type="radio"/> No
	If Yes, the appropriate Consent or Waiver form must be fully completed and submitted with this form.		
	If No, the applicable Declaration of No Spouse must be completed and submitted with this form.		
3	Will your Spouse/Common law partner become the Successor Annuitant on your death?		<input type="radio"/> Yes <input type="radio"/> No
	Will the annual minimum payment be based on the age of your Spouse/Common-law partner?		<input type="radio"/> Yes <input type="radio"/> No
	Note: If funds are locked-in, certain restrictions may apply or override these requests.		
	If you answered Yes to either question, complete the following and provide a copy of proof of age for your Spouse/Common-law partner:		
	Full name of Spouse or Common-law partner:	Social Insurance Number:	Date of Birth: (dd/mmm/yy)
4	Income Payment Details <input style="width: 150px;" type="text"/>		
	Payment Start Date: (dd/mmm/yy) _____ (between the 1 st and the 28 th of the month)		
	Payment Frequency: <input type="radio"/> Monthly <input type="radio"/> Quarterly <input type="radio"/> Semi-annually <input type="radio"/> Annually		
	Payment Stream: <input type="radio"/> Minimum payment as prescribed by the Income Tax Act (Canada)		
	<input type="radio"/> Fixed amount of \$ _____ <input type="radio"/> GROSS or <input type="radio"/> NET of applicable taxes		
	<input type="radio"/> Maximum payments as prescribed by provincial/federal pension legislation (locked-in funds)		
5	Electronic Funds Transfer (EFT) Payment Method		
	<input type="radio"/> Same as current banking arrangements		
	<input type="radio"/> Account shown on the ATTACHED VOID CHEQUE		
	<input type="radio"/> Savings Account only, use the following account:		
	Account holder's name(s)		Financial Institution
	Bank #	Transit #	Account #
6	Special Instructions		

7 Investment and Withdrawal Instructions				
Investment Option		Instructions ○ remain unchanged or reallocate as indicated in percentages (%) below	Withdrawal Instructions (indicate either all order of withdrawal or all %)	
			Order of Withdrawal	%
Treasury Interest Option				
Guaranteed Interest Option				
Term	Rate			
Term	Rate			
Segregated Funds				
Money Market – Class A				
Bond – Class A				
Income – Class A				
Global Balanced – Class A				
Balanced – Class A				
Asset Allocation – Class A				
Global Dividend Growth – Class A				
Dividend Growth – Class A				
Canadian Equity – Class A				
Elite Equity – Class A				
Small Cap Equity – Class A				
American Value – Class A				
US Equity Index – Class A				
Global Equity – Class A				
Global Smaller Companies – Class A				
International Equity – Class A				
Conservative Portfolio – Class A				
Balanced Portfolio – Class A				
Moderate Growth Portfolio – Class A				
Growth Portfolio – Class A				
Aggressive Growth Portfolio – Class A				
Total (must total 100%)				

8 Declaration, Acknowledgement, Authorization and Consent		
<p>I request that The Empire Life Insurance Company (Empire Life):</p> <ul style="list-style-type: none"> • convert my existing Elite or Elite XL Investment Program Savings Plan to an Elite or Elite XL Investment Program RRIF, as applicable; • apply to have this policy registered as a Retirement Income Fund under the Income Tax Act (Canada) and any other applicable Act(s). <p>I understand and agree that:</p> <ul style="list-style-type: none"> • this contract continues to be subject to the provisions of the Income Tax Act (Canada) and any other applicable Act(s), and, if applicable, any locked-in endorsements, and that all payments made from the policy will be subject to tax under these Act(s); • all other terms and conditions of the existing policy remain the same and any declarations, consents or authorizations previously provided by me continue in force; • any previously established Policyowner Investment Authorization remains in effect and this authorization allows my Advisor to process certain transactions related to the investment options held within the policy without written instructions from me; • any direct deposit arrangements may be terminated on 10 days written notice beginning the day the notice is mailed either by Empire Life or by me. <p>I authorize my financial institution to:</p> <ul style="list-style-type: none"> • honour any deposit (credit) to my account as outlined in Section 5 of this application; • return to Empire Life any amount deposited to which I am not entitled. 		
Signature of Owner/Annuitant	Irrevocable Beneficiary (if applicable)	
X	X	
Signature of Advisor (as witness to all signatures)	Signed at (City and Province)	Date (dd/mmm/yy)
X		

9 To be completed by Advisor	
Name of Advisor (print)	Advisor Code
Name of GA, AGA or MGA Firm (print)	Contact at GA, AGA or MGA Firm

