

PI FINANCIAL



PI Financial Corp.
 1900 - 666 Burrard Street
 Vancouver, BC, Canada V6C 3N1
 Tel: 604-664-2900
 Web site: www.pifinancialcorp.com
 E-mail: info@pifinancialcorp.com

ACCOUNT NUMBERS

IA #

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Client #

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New account

Change of IA

Change to existing account

Client Information

Account Holder MR. MISS MRS. MS. DR.		SIN # or Foreign Tax ID #		Date of Birth MM DD YR		EST NET LIQUID ASSETS (Cash and securities less loans outstanding against securities) A _____ PLUS					
Residential Address				Are you a US resident for US tax purposes or a US citizen?				EST NET FIXED ASSETS (Fixed assets less liabilities outstanding against fixed assets) B _____ EQUALS			
City		Province		In what jurisdictions are you tax-resident?				EST TOTAL NET WORTH (A+B=C) C _____			
Country of Residence		Citizenships (list all)		Postal Code				APPROX. ANNUAL INCOME FROM ALL SOURCES D _____			
Employer Name			Occupation			FUNDS BORROWED OUTSIDE OF PI FOR INVESTMENT PURPOSES \$ _____					
Employer Address			City		Province	Postal Code		INVESTMENT KNOWLEDGE (circle one) Sophisticated Good Limited Minimal			
Res Phone # () ()		Bus Phone # () ()		Cell/Pager # () ()		E-mail Address					
Do you want statements/confirmations sent to your: (please circle one) Residence Business Duplicate (attach instructions)								INVESTMENT EXPERIENCE (in years)			
If residential address is a P.O. Box, please provide street address:								# of years # of years			
Name of Co-Account Holder (please complete Personal Information Form)			Marital Status		Spouse's Name			Equities () Short Sales ()			
Spouse's Employer			Spouse's Occupation			Number of Dependents			Bonds () Options ()		
ACCOUNT OBJECTIVES, RISK FACTORS AND TIME HORIZON											
Income _____ %		Low _____ %		CAPITAL GAINS		Medium _____ % = 100 %		Mutual Funds () None			
Short term _____ % = 100 %		High _____ %		Are RRSP/RRIF/TFSA objectives the same? <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> No—attach details		Commodities ()		Others () please specify			
Medium term _____ %		Is there a specific time horizon for this account? <input type="checkbox"/> No <input type="checkbox"/> Yes									
Long term _____ %		If yes, please indicate the time horizon date (month and year) _____; and reason _____									
Are you an Officer or Director or Insider of a publicly traded issuer? <input type="checkbox"/> No <input type="checkbox"/> Yes - please specify:											
Do you singularly or as part of a group control more than 20% of the votes of a publicly traded issuer? <input type="checkbox"/> No <input type="checkbox"/> Yes - please specify:											
Are you related to a PI employee or do you reside at the same address as a PI employee? <input type="checkbox"/> No <input type="checkbox"/> Yes - state name and relationship:											
Are you, or do you reside with an employee or principal of an IIROC member firm? <input type="checkbox"/> No <input type="checkbox"/> Yes - state name and relationship:											
Does anyone other than the account, or co-account holder have any authority over, or any financial interest in this account? <input type="checkbox"/> No <input type="checkbox"/> Yes - attach Trading Authorization Form											
Have you authorized any PI employee to use discretion in handling your account? <input type="checkbox"/> No <input type="checkbox"/> Yes - attach Discretionary Agreement Form											
Do you have any other PI accounts? <input type="checkbox"/> No <input type="checkbox"/> Yes - please provide account number:											
Do you have accounts at other investment firms? <input type="checkbox"/> No <input type="checkbox"/> Yes - What type of account? <input type="checkbox"/> Cash <input type="checkbox"/> RRSP <input type="checkbox"/> Other Please specify which firm:											
Have you ever been the subject of a sanction, or penalty, in any securities-related or fraud-related, criminal, regulatory, or civil matter? <input type="checkbox"/> No <input type="checkbox"/> Yes - please provide details											
Are you currently the subject of any investigation in any securities-related or fraud-related, criminal, regulatory, or civil matter? <input type="checkbox"/> No <input type="checkbox"/> Yes - please provide details											
Are you a Politically Exposed Foreign Person? <input type="checkbox"/> No <input type="checkbox"/> Yes											
I certify that the information provided by me on this form is true and complete, and I agree to advise PI Financial Corp. (PI) immediately of any inaccuracies or changes. I agree to the terms and conditions set out in any Client Account Agreement relating to my account or accounts. I also agree to the terms and conditions of PI's Privacy Policy as amended from time to time and consent to the collection and use of my personal information as set out in the Privacy Policy. In particular, I authorize PI to obtain such credit and other financial information, as well as public information regarding me as is permitted by law. Should I so wish, or be it deemed to be necessary of PI, I hereby apply for a margin facility with respect to my account or accounts.											
MM DD YR		Date				Signature of Account Holder				Signature of Co-Account Holder	
FOR OFFICE USE ONLY											
Is IA registered in province where client resides? <input type="checkbox"/> Yes <input type="checkbox"/> No			Have you personally met the client? <input type="checkbox"/> Yes <input type="checkbox"/> No			How long have you known the client?					
How did the client learn about PI? <input type="checkbox"/> Personal contact <input type="checkbox"/> Advertising/direct mail <input type="checkbox"/> Phone in <input type="checkbox"/> Walk in <input type="checkbox"/> Website						Comments: _____					
Referred by (if existing client, include name and account number): _____						_____					
MM DD YR		Date		IA Signature				Partner/Director / Branch Manager's Approval		Date	

Information Required by Securities Regulators