

Note: [28 Sep 2009] – The following version of 33-109F2 repealed the version that was initially implemented on February 21, 2003. This version of 33-109F2 is no longer current.

FORM 33-109F2
CHANGE OR SURRENDER OF INDIVIDUAL CATEGORIES
(section 4.2 or 2.2(2) or 2.5(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 individual seeks to add and/or remove individual registration categories or permitted activities.

Terms

In this form, “you”, “your” and “individual” mean the registered individual or permitted individual who is seeking to add and/or remove registration categories or permitted activities.

How to submit this 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, you may submit this form in a format other than NRD format.

Item 1 Individual

Name of individual _____

NRD number of individual _____

Item 2 Registrations jurisdictions

1. Are you filing this form under the passport system / interface for registration?

Only choose “no” if you are registered in:

- (a) only one jurisdiction of Canada, or
- (b) more than one jurisdiction of Canada and you are requesting a change or surrender:
 - (i) in a non-principal jurisdiction or jurisdictions, but not in your principal jurisdiction.

Yes No

2. Check each jurisdiction where you are seeking the change or surrender of individual categories of registration.

- Alberta
- British Columbia
- Manitoba
- New Brunswick
- Newfoundland and Labrador
- Northwest Territories
- Nova Scotia
- Nunavut
- Ontario
- Prince Edward Island
- Québec
- Saskatchewan
- Yukon

Item 3 Removing categories

What categories are you seeking to remove?

Item 4 Adding categories

1. What categories are you seeking to add?

2. If you are seeking registration as a representative of a mutual fund dealer or of a scholarship plan dealer in Québec, are you covered by your sponsoring firm's professional liability insurance?

Yes No

If "No", state:

The _____ name _____ of _____ your insurer _____

Your policy number _____

Item 5 Reason for surrender

If you are seeking to remove a category or permitted activity, state the reason for the surrender in the local jurisdiction.

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.

The personal information required under this form is also collected by and used by the SROs set out in Schedule A to administer and enforce their respective by-laws, regulations, rules, rulings and policies.

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. 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

It is an offence under securities legislation and/or derivatives legislation, including commodity futures legislation to give false or misleading information on this form.

Item 8 Certification

Certification-NRD format:

I confirm I have discussed the questions in this form with an officer, branch manager or supervisor of my sponsoring firm. To the best of my knowledge and belief, the officer, branch manager or supervisor was satisfied that I fully understood the questions. I will limit my activities to those permitted by my category of registration.

I am making this submission as agent for the individual identified in this form. By checking this box, I certify that the individual provided me with all of the information on this form.

Certification-Format other than NRD format:

By signing below:

1. I certify to the regulator or, in Québec, the securities regulatory authority, in each jurisdiction where I am submitting this form, either directly or through the principal regulator, that:

- I have read this form and understand the questions, and
- all of the information provided on this form is true, and complete.

2. I confirm I have discussed the questions in this form with an officer, branch manager or supervisor of my sponsoring firm. To the best of my knowledge and belief, the officer, branch manager or supervisor was satisfied that I fully understood the questions. I will limit my activities to those permitted by my category of registration.

Signature of individual _____

Date signed _____
(YYYY/MM/DD)

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 individual, either directly or through the principal regulator, that:

1. the individual identified in this form will be engaged by the firm as a registered individual, or a non registered individual, and
2. I have, or a branch manager or supervisor or another officer or partner has, discussed the questions set out in this form with the individual. To the best of my knowledge and belief, the individual fully understands the questions.

Name 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
 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 (in BC)

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
 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
 Iqaluit, 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@iroc.ca