



Application for the Canada Disability Savings Grant and/or Canada Disability Savings Bond For Beneficiaries Aged 18 or Over

- Application For:** Canada Disability Savings Grant
 Canada Disability Savings Bond

Protected "B" When Completed - Personal Information Bank ESDC PPU 038

Part A : Plan Holder

Instructions:

1. Check the incentives you are applying for at the top of this form.
2. Read this document carefully. If you have any questions, do not hesitate to ask the Issuer.
3. **This form is valid only if completed, signed, dated, and given to the Issuer. Do not send directly to ESDC**
4. Please print clearly. Keep a copy for your records.

Plan Holder 1

 First Name Last Name Telephone Number
 (or Name of Agency and Name of Representative)

 Address Postal Code

Plan Holder 2

(Complete in the case of joint holders. Attach additional pages in the case of a third holder)

 First Name Last Name Telephone Number

 Address Postal Code

Beneficiary

 First Name Last Name

Issuer

BMO Investments Inc. 1-800-665-7700
 Name Telephone Number

2465 Argentia Road, 5th Floor, Mississauga, Ontario L5N 0B4
 Address Postal Code

 RDSP Contract Number

Explanation of Key Words*:

Beneficiary - Individual who will receive money in the future to help ensure their financial security.

Disability Tax Credit (DTC) - a non-refundable tax credit available to individuals who, in a given taxation year, have one or more severe and prolonged impairments in physical or mental functions, the effects of which have been certified in writing by a medical practitioner and approved by the Canada Revenue Agency (CRA) for the purposes of section 118.3 of the *Income Tax Act*.

Legal Representative - persons administering, winding up, controlling or otherwise dealing in a representative or fiduciary capacity with the property that belongs or belonged to, or that is or was held for the benefit of the Beneficiary.

Issuer - Financial organization authorized to offer the RDSP to the public and that will open an RDSP for the Holder and that invests, administers and distributes the money in the RDSP for the Beneficiary.

Holder - An Individual, Agency, Department or Institution that opens an RDSP, names one Beneficiary and may deposit money (contributions) for the Beneficiary into the RDSP.

*Note : These explanations are provided for your information only. In the event of a discrepancy, the legal definitions found in the *Canada Disability Savings Act* and the *Income Tax Act* shall prevail.

Your Privacy Rights

Employment and Social Development Canada protects the confidentiality of your personal information. We cannot give your personal information to any person or organization without your written consent, except where authorized by legislation. The *Privacy Act* gives you (or your authorized representative) the right to access or request correction to your personal information kept in your government file. Personal information and other information included in this form will be kept in Personal Information Bank "ESDC PPU 038" of Employment and Social Development Canada. Instructions for obtaining a copy of your personal information are available in *Info Source*. You can get a printed copy of *Info Source* at Service Canada Centres or by calling 1-800-O-Canada (1-800-622-6232). You may also view the information electronically on the Internet at: www.infosource.gc.ca

Where to get more information about the Canada Disability Savings Program:

Telephone: 1-800-O-Canada (1-800-622-6232)
 1-800-926-9105 (TTY)
 E-mail: rdsp-reei@esdc-edsc.gc.ca
 Internet: www.disabilitysavings.gc.ca

Ce formulaire est disponible en français
This form is available in alternate formats





Application for the Canada Disability Savings Grant and/or Canada Disability Savings Bond For Beneficiaries Aged 18 or Over

Part A : Plan Holder (continued)

Notice

Not more than \$70,000 in Canada Disability Savings Grants and \$20,000 in Canada Disability Savings Bonds may be paid in respect of a Beneficiary during their lifetime.

Conditions

- 1. In order for the Canada Disability Savings Grant to be paid, the Beneficiary must be less than 49 years of age at the end of the year preceding the year in which a contribution was made, eligible to receive the Disability Tax Credit and resident in Canada at the time of each contribution to the Registered Disability Savings Plan.
2. In order for a Canada Disability Savings Bond to be paid, the Beneficiary must be less than 49 years of age at the end of the year preceding the year for which the Bond is payable, the Beneficiary must be eligible for the Disability Tax Credit for the year for which the Bond is requested and resident in Canada immediately before a Canada Disability Savings Bond payment is made.
3. A Canada Disability Savings Grant may be paid into the Registered Disability Savings Plan of the Beneficiary where the total of the contribution and all other contributions made to a Registered Disability Savings Plan of the Beneficiary does not exceed \$200,000.

Sharing of your Personal Information

I understand that:

- 1. The authority of the Government of Canada to collect, use and share personal information and other information included on this form for the purposes described below is provided under the Canada Disability Savings Act, the Department of Social Development Act and the Income Tax Act.
2. The information included on this form and the information respecting the Registered Disability Savings Plan may be used by and shared between Human Resources and Skills Development Canada, the Canada Revenue Agency, and the Issuer for the administration (which may include policy analysis, research and evaluation) of the Canada Disability Savings Act and the Income Tax Act.
3. This application for the Canada Disability Savings Grant will be resubmitted by the Issuer at the time of each contribution. The application for the Canada Disability Savings Bond will be automatically resubmitted in Employment and Social Development Canada electronic system every year.

Declaration and Consent of the Holder

I authorize the Issuer to apply for the incentives I have indicated on the previous page in respect of the Beneficiary.

I agree to inform the Issuer if, at any time, there is a change in the Beneficiary's circumstances.

Plan Holder

- Yes I consent to the use and sharing of my personal information as mentioned above.
No

Joint Holder (if applicable)

- Yes I consent to the use and sharing of my personal information as mentioned above.
No

I understand that the provision of the information is voluntary and that I am not required to give my consent; however, if I do not give my consent, Employment and Social Development Canada cannot pay the Canada Disability Savings Grant and/or Canada Disability Savings Bond to the Issuer in respect of the Beneficiary's Registered Disability Savings Plan.

NOTE: In the case of a third holder, please attach a statement indicating that the third holder understands and consents to the above.

Holder's Signature

Date (DD/MM/YYYY)

Joint Holder's Signature (if applicable)

Date (DD/MM/YYYY)

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Application for the Canada Disability Savings Grant and/or Canada Disability Savings Bond For Beneficiaries Aged 18 or Over

Protected "B" When Completed - Personal Information Bank ESDC PPU 038

Part B: Beneficiary Aged 18 or over, or Legal Representative

Instructions:

1. This section should be completed and signed by beneficiaries over the age of 18 or their legal representative. See below for definitions of these terms.
2. Read this document carefully. If you have any questions, do not hesitate to ask the Issuer.
3. **This form is valid only if completed, signed, dated, and given to the Issuer. Do not send directly to ESDC.**
4. Please print clearly. Keep a copy for your records.

Beneficiary

First Name	Last Name	Social Insurance Number
Address	Postal Code	
Date of Birth (DD/MM/YYYY)	Gender F/M	Telephone Number

Legal Representative

(if possible)

First Name	Last Name	Telephone Number
Address	Postal Code	

Issuer

BMO Investments Inc.	1-800-665-7700
Name	Telephone Number
2465 Argentia Road, 5th Floor, Mississauga, Ontario	L5N 0B4
Address	Postal Code
RDSP Contract Number	

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Legal Representative - persons administering, winding up, controlling or otherwise dealing in a representative or fiduciary capacity with the property that belongs or belonged to, or that is or was held for the benefit of the Beneficiary.

Issuer - Financial organization authorized to offer the RDSP to the public and that will open an RDSP for the Holder and that invests, administers and distributes the money in the RDSP for the Beneficiary.

Holder - An Individual, Agency, Department or Institution that opens an RDSP, names one Beneficiary and may deposit money (contributions) for the Beneficiary into the RDSP.

*Note : These explanations are provided for your information only. In the event of a discrepancy, the legal definitions found in the *Canada Disability Savings Act* and the *Income Tax Act* shall prevail.

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Application for the Canada Disability Savings Grant and/or Canada Disability Savings Bond For Beneficiaries Aged 18 or Over

Part B: Beneficiary Aged 18 or over, or Legal Representative **(Continued)**

Notice

The information collected in this section of the application form may be used to verify the Beneficiary's residency, and his/her family income for the purposes of determining whether a Canada Disability Savings Grant or Canada Disability Savings Bond may be paid. While information collected may also be used to verify the Beneficiary's eligibility for the Disability Tax Credit, information contained within the Disability Tax Credit Certificate (i.e., the nature of the Beneficiary's disability) will **not** be collected, used, or disclosed.

Sharing of your Personal Information

I understand that:

1. The authority of the Government of Canada to collect, use, and share personal information and other information included on this form for the purposes described below is provided under the *Canada Disability Savings Act*, the *Department Social Development Act* and the *Income Tax Act*. Once under the control of Employment and Social Development Canada, that information is administered in accordance with all applicable laws including the *Canada Disability Savings Act*, the *Privacy Act* and the *Department of Social Development Act*. Once under the control of the Canada Revenue Agency, that information is administered in accordance with all applicable laws including the *Privacy Act* and the *Income Tax Act*.
2. The information included on this form and the information respecting the Registered Disability Savings Plan may be used by and shared between Human Resources and Skills Development Canada, the Canada Revenue Agency, and the Issuer for the administration (which may include policy analysis, research and evaluation) of the *Canada Disability Savings Act* and the *Income Tax Act*.
3. This application for the Canada Disability Savings Grant will be resubmitted by the Issuer at the time of each contribution. The application for the Canada Disability Savings Bond will be automatically resubmitted in Employment and Social Development Canada electronic system every year. In both cases, the Holder will not be required to re-apply for these incentives at the time of each contribution (in the case of the Grant) or each year (in the case of the Bond) unless any of the information provided above changes. However, should the Holder ever wish to discontinue payments of the Canada Disability Savings Grant and/or Canada Disability Savings Bond into the Registered Disability Savings Plan, the "Revocation of Request for Canada Disability Savings Grant and/or Canada Disability Savings Bond" form available at the Issuer's place of business must be completed and signed and given to the Issuer, indicating that the Holder requests payments to cease.

Declaration and Consent of the Beneficiary Aged 18 or over, or Legal Representative

I confirm that I am the Beneficiary aged 18 or over, or the legal representative of the Beneficiary.

I confirm that the Beneficiary meets the residency requirements set out above and agree to inform the Issuer if, at any time, there is a change in the Beneficiary's residency status.

Yes I consent to the use and sharing of my personal information (or the personal information of the Beneficiary) as mentioned above.

No

I understand that the provision of the information is voluntary and that I am not required to give my consent; however, if I do not give my consent, Employment and Social Development Canada cannot pay the Canada Disability Savings Grant and/or Canada Disability Savings Bond to the Issuer in respect of the Beneficiary's Registered Disability Savings Plan.

Signature of the beneficiary aged 18 or older
or legal representative

Date (DD/MM/YYYY)