

REQUEST TO OPEN A NEW PERSONAL CANADIAN DOLLAR PRIMARY CHEQUING ACCOUNT AT BANK OF MONTREAL – NEWCOMERS TO CANADA

Print clearly using blue or black ink.

Insert your full name

You intend to arrive in Canada within the next 12 months, and so request Bank of Montreal (we or BMO) to open a personal Canadian Dollar Primary Chequing Account (a chequing account), in your name, at the following branch, prior to your arrival:

Print clearly using blue or black ink.

Name of BMO branch	Name of BMO branch					
Unit Number (if applicable)	Street Number	Street Name				
P.O. Box Number (if applicable)	City	Province/Territory	Postal Code			
Telephone number including area code						

Required Documentation:

You have enclosed the required documents with this letter as follows:

- An originally completed *Certificate of Identity Banker Newcomers to Canada Account Open Request*
- An originally completed *Certificate of Identity Lawyer/Solicitor Newcomers to Canada Account Open Request*
- Photocopied/certified identification document one from your banker and one from your lawyer/solicitor

You understand these documents must be mailed or couriered and cannot be faxed to the BMO branch indicated above. We require original documents be provided in all cases. You understand that a representative from the BMO branch will contact you if there are any discrepancies with the documents provided.

You understand we will mail back to your personal address, as shown on the completed *Certificate of Identity* documents:

- A copy of the Everyday Banking Account Application Form,
- A letter enclosing your chequing account number, and
- A copy of the Agreements, Bank Plans and Fees for Everyday Banking.

Upon your receipt of these documents, you may forward funds via international wire transfer to your BMO branch to be deposited into your new chequing account. You understand that funds should be remitted in Canadian dollars. If you choose to remit funds in any other currency, you understand that the funds received by us will be converted to Canadian dollars for deposit to your new chequing account. You understand that you may only make one deposit in advance of your arrival in Canada.

Initial Deposit

In order for us to comply with applicable regulations, complete the following if you intend to make an international wire transfer after your new chequing account has been opened and prior to your arrival in Canada.

Your chequing account will be in Canadian dollars. If you send funds in any other currency, we will convert the funds to Canadian dollars for deposit to your chequing account.

You may only make one international wire transfer.

Print clearly using blue or black ink.

Amount in Canadian dollars:	c\$
Funds will be sent within:	(in months)
	Cannot exceed 12 months
Source of funds:	
	Provide a description of where the funds will be coming from

You are expected to arrive in Canada within 12 months of the date of this request form, and you understand that we are unable to hold funds in your name for longer than this 12-month period unless you provide proof that your landing date in Canada has been delayed, in which case we may hold funds in your name for an additional 12-month period. If you do not arrive in Canada within the initial 12-month period, or, if extended, the second 12-month period, any funds in your account will be returned to the financial institution that sent the funds on your behalf. You are responsible for any fees associated with returning funds back to your financial institution.

Access To Your Account

You understand your account will not be accessible to you until you arrive in Canada and go in person to your BMO branch to have your identity verified by our employee.

You understand your chequing account will be set up with paperless statements and the Practical Plan. Until you arrive in Canada and have your identified, the Plan fee will be rebated.

You understand your chequing account will not earn interest.

You understand you must bring with you the same identification document provided to your banker and Lawyer/Solicitor and certified by them, along with proof of your authorized landing in Canada issued by the Government of Canada.

Privacy Disclosure & Consent - Your Personal Information

To learn more about how we collect, use, disclose and safeguard your Personal Information, your choices, and the rights you have, please see our Privacy Code (available at bmo.com/privacy, or from any of our branches).

What is Personal Information?

Your Personal Information is information about you that you provided to us or information we collected from other sources such as credit reporting agencies, and includes your name, address, age, financial data, Social Insurance Number, employment information, and other information that could be used to identify you.

Why do we need your Personal Information?

We collect your Personal Information to:

- verify your identity;
- ensure we have accurate information about you;
- understand your financial needs (including your eligibility for products and services you requested or accepted or were pre-approved for);
- to manage our relationship;
- protect against fraud and manage other risks;
- communicate with you regarding products and services that may be of interest;
- understand our customers, including through analytics, and to develop and tailor our products and services;
- comply with legal or regulatory requirements, or as permitted by law; and
- respond to questions you may have.

If we use your Personal Information for a different purpose, we will identify that purpose.

Sharing your Personal Information

BMO Financial Group consists of Bank of Montreal and its affiliates. Your Personal Information, including information about your authorized representatives and beneficiaries, is shared within BMO Financial Group, to the extent permitted by law, to:

- ensure we have accurate information about you, and your authorized representatives and beneficiaries,
- manage our total relationship,
- provide a better customer experience,
- meet your needs as they change and grow, and
- manage our business.

Your Choices

Sharing: You may choose not to allow us to share account-specific information within BMO Financial Group, but you understand we will share your Personal Information where two or more BMO Financial Group affiliates provide you with jointly offered products or services.

Direct marketing: You may choose not to allow us to use your contact information for direct marketing, such as mail, telemarketing or email informing you about products and services we think may be of interest and value to you.

Please see "Contact Us" in our Privacy Code for more details on how to opt out.

The following questions must be answered by all applicants.

- Are you a tax resident of Canada?
 □ Yes □ No
- Are you a tax resident or citizen of the United States?
 □ Yes □ No
- 3. Are you a tax resident of any other country other than Canada and the United States? □ Yes □ No
- 4. If you answered "Yes" to questions 2 or 3, provide the country and the Taxpayer Identification Number for each declared country (this form provides space for up to 4 countries to be declared)

Country:	Country:		
Taxpayer Identification Number (TIN):	Taxpayer Identification Number (TIN):		
If TIN not provided, select one of the following reasons:	If TIN not provided, select one of the following reasons:		
\Box I have applied for a TIN but have not yet	\Box I have applied for a TIN but have not yet		
received it	received it		
I have a TIN but I do not have it with me today. I will provide it later	I have a TIN but I do not have it with me today. I will provide it later		
\Box I will apply for a TIN and provide it later	 I will apply for a TIN and provide it later My jurisdiction of tax residence does not issue TINs to its residents 		
□ My jurisdiction of tax residence does not issue			
TINs to its residents			
Country:	Country:		
Taxpayer Identification Number (TIN):	Taxpayer Identification Number (TIN):		
If TIN not provided, select one of the following reasons:	If TIN not provided, select one of the following reasons:		
\Box I have applied for a TIN but have not yet	\Box I have applied for a TIN but have not yet		
received it	received it		
\Box I have a TIN but I do not have it with me today. I	□ I have a TIN but I do not have it with me today. I		
will provide it later	will provide it later		
\Box I will apply for a TIN and provide it later	\Box I will apply for a TIN and provide it later		
My jurisdiction of tax residence does not issue TINs to its residents	My jurisdiction of tax residence does not issue TINs to its residents		

Please read the following important acknowledgements and sign where indicated.

- You acknowledge this chequing account will only be used by you and only for your own personal transactions.
- You have enclosed the required completed documents.
- If you are sending a wire transfer to your chequing account, you have completed the initial deposit requirements.
- You have read and understood the Access to Your Account.
- You have read and understood the Privacy Disclosure & Consent.

Signature

Date (DD/MM/YYYY)



Instruction Sheet: Opening a New Personal Canadian Dollar Primary Chequing Account with Bank of Montreal Prior to Arrival in Canada

You can open one chequing account (chequing account) up to 12 months prior your arrival in Canada:

First, select a branch of Bank of Montreal (we or BMO) by visiting https://branchlocator.bmo.com and record the branch name, complete mailing address including the postal code, and telephone number.

Next, print and complete the following documents and steps below:

1) The Letter of Direction – Banker - Certificate of Identify Request

Take this document to your banker. It is your formal request for their assistance in opening a chequing account in Canada. Please indicate the name of your financial institution in the space provided and sign and date the document.

2) The Certificate of Identity - Banker - Newcomers to Canada Account Open Request

Take this document to your banker along with one piece of acceptable government-issued photo identification document for completion as described in the *Letter of Direction - Banker* above.

3) The Letter of Direction – Lawyer/Solicitor - Certificate of Identity Request

Take this document to your lawyer/solicitor. It is your formal request for their assistance in opening a chequing account in Canada. Please indicate the name of your lawyer or solicitor in the space provided and sign and date the document.

4) The Certificate of Identity– Lawyer/Solicitor Newcomers to Canada Account Open Request

Take this document to your lawyer or solicitor along with one piece of acceptable government-issued photo identification document for completion as described on the *Letter of Direction - Lawyer/Solicitor* above.

5) Complete *Request to Open a New Personal Canadian Dollar Primary Chequing Account at Bank of Montreal – Newcomers to Canada*

6) Gather the completed Certificates of Identity, along with the certified photocopied identification document and the Request to Open a New Personal Canadian Dollar Primary Chequing Account form, and mail them all to the mailing address of the BMO branch in Canada where you selected to open your chequing account.

The BMO branch you selected will mail back to you documents acknowledging the chequing account has been opened, will provide you with your new chequing account number, and will provide a copy of the Agreements, Bank Plans and Fees for Everyday Banking. You will then be able to send **one** international wire transfer to your new chequing account.

IMPORTANT NOTE: Your chequing account will be in Canadian dollars. If you send funds in any other currency, we will convert the funds to Canadian dollars for deposit to your chequing account. We are not able to hold your deposited funds in your chequing account longer than 12 months or, for an additional 12 months thereafter if you request to extend with proof.



Certificate of Identity – Banker – Newcomers to Canada Account Open Request

(To be used by a banker to confirm the identification documents of an individual who signs this request)

Full Name of financial institution:		
Complete address of financial institution:		
Employee name:		
Employee title:		
You,		
(name of banker)		(title of banker)
of	in	
(complete bank name, branch /	unit address)	(town / city, state / province, country)
You hereby certify that:		
	individual)	, as named in this certificate,
was signed in your presence documents recorded below;	and was compared for consi	stency against the signature provided on the identification

Individual's personal information is valid and accurate, and recorded as:

Personal Information - Individual	Particulars
Name	
Date of Birth (dd/mm/yyyy)	
Current address (including town / city, state /	
province / territory, country, and zip / postal code)	
Telephone (Home) / (Business)	
Mobile or Cell / email	
Primary Occupation – Fully describe	
(Note: If Retired, provide occupation before retirement or current	
one, such as volunteer.)	
Occupation Details	

Primary Employment Status	 Full Time (30 hours per week or more) Part Time (less than 30 hours per week) Retired Not presently employed Self Employed Seasonal Casual/contract
Employer's name for Primary Occupation (if applicable)	
Employer's address for Primary Occupation (if applicable) (including town / city, state / province/ territory, country, and zip / postal code)	
Secondary Occupation (if applicable – if individual has two employers) - <i>Fully describe</i>	
Secondary Employment Status (if applicable – if individual has two employers)	 Full Time (30 hours per week or more) Part Time (less than 30 hours per week) Retired Not presently employed Self Employed Seasonal Casual/contract
Source of wealth (Select all that apply)	 Employment Income Gift Grants/Scholarship/Bursaries Insurance Claims/Payments Investment Income (Savings) Retirement/Pension Income Sale of Asset/Home/Business Self-Employment Income Social Assistance Support Payments Trust/Inheritance Windfall-Casino/Contest/Lottery Winnings
Intended use of account	 Deposits/Payments/Living Expenses All-Purpose Savings Saving for a Specific Goal Emergency Fund Vacation Vehicle Home/Vacation Home Retirement Education Other - Enter Details: Investment

Non-Resident Questionnaire	□ Foreign student studying in Canada
	□ Canadian student studying overseas
	Non-Resident with Canadian property
	□ Non-Resident with Canadian income
	Canadian with foreign work assignment
	Non-Resident working temporarily in Canada
	\square Non-Resident with frequent seasonal visits to Canada
	Immigrating to Canada
	□ Other. Enter Details:

3	You ascertained the identity of		by verifying
	,	(name of individual)	, , , , ,

a **minimum** of one piece of that individual's photo identification documents which are original, valid and in good condition, namely: driver's license or passport or any federal or provincial / territorial / state government issued photo identification document which is allowed to be recorded by law and a description of the identification document examined by you is as follows:

If passport is used as primary identification, does the passport indicate a U.S. place of birth? No____Yes____

	Type Of Identification Document*	Identification Document Number	Identification Document Place of Issue Country, Province /Territory/State	Date of Issue DD/MMM/YYYY (if available)	Expiry Date DD/MM/YYYY (if applicable)	
1						
2						
	* Clean / Clean true certified photocopy of the identification documents are attached					

The identity and identification document requirements for the completion of this legal document are subject to and must adhere to the rules and regulations of the Government of Canada's *Proceeds of Crime (Money Laundering) and Terrorist Financing Act.*

The approximate amount of time that this individual has maintained a banking relationship with your bank is ______ year(s) and ______ month(s).

Dated this ______ day of ______, 20_____

Signature of individual named in this certificate

Signature of Banker

Phone Number



Certificate of Identity – Lawyer/Solicitor – Newcomers to Canada Account Open Request

(To be used by a Lawyer or Solicitor to confirm the identification documents of an individual who signs this request)

You	of	
(name of Lawyer/Solicitor)		Name of Law Firm of Lawyer / Solicitor
	in	
(complete street address)		(town / city, state / province, country)
do hereby certify that:		
1 Signature of		, as named in this certificate,
(name of individual)		
was signed in your presence and was compa	red for c	onsistency against the signature provided on
the identification document recorded below;		
2 Individual's personal information is valid and	l accurate	e, and recorded as:
Personal Information - Individual		Particulars
Name		
Date of Birth (dd/mm/yyyy)		
Current address (including town / city, state /prov	vince /	
territory, country and Postal / Zip Code)		
Telephone (Home): / (Business)		
Mobile or Cell / email		
Primary Occupation - Fully describe		
(Note: If Retired, provide occupation before retire	ment or	
current one, such as volunteer)		
Occupation Details		
Primary Employment Status		□ Full Time (30 hours per week or more)
		□ Part Time (less than 30 hours per week)
		□ Retired
		Not presently employed
		□ Self Employed
		□ Seasonal
		Casual/contract
Employer Name for Primary Occupation (if applica	ıble)	
Employer Address for Primary Occupation (if appli	icable)	
(including town /city, state / province / territory,	country,	and
Postal / Zip Code)		
Secondary Occupation (if applicable – if individual	has two	
employers) - <i>Fully describe</i>		

	□ Other. Enter Details:		
	Immigrating to Canada		
	□ Non-Resident with frequent seasonal visits to Canada		
	□ Non-Resident working temporarily in Canada		
	Canadian with foreign work assignment		
	□ Non-Resident with Canadian income		
	□ Non-Resident with Canadian property		
	□ Canadian student studying overseas		
Non-Resident Questionnaire	□ Foreign student studying in Canada		
	Investment		
	□ Other - Enter Details:		
	Education		
	Retirement		
	□ Home/Vacation Home		
	□ Vehicle		
	□ Vacation		
	Emergency Fund		
	\Box Saving for a Specific Goal		
	□ All-Purpose Savings		
Intended use of account	Deposits/Payments/Living Expenses		
	Windfall-Casino/Contest/Lottery Winnings		
	Trust/Inheritance Windfall Cosing (Contact/Letter: Wingings)		
	Support Payments		
	Self-Employment Income Social Assistance		
	□ Sale of Asset/Home/Business		
	Retirement/Pension Income		
	Investment Income (Savings)		
	Insurance Claims/Payments Insurance Claims/		
	Grants/Scholarship/Bursaries		
· · · · · · · · · · · · · · · · · · ·			
(Select all that apply)	Employment Income		
Source of wealth			
	□ Self Employed		
	 Retired Not presently employed 		
has two employers)	\Box Part Time (less than 30 hours per week)		
Secondary Employment Status (if applicable – if individual	\square Dept Times (least the 2.20 hours a second b)		

3 You ascertained the identity of _____

(name of individual)

_by verifying

a **minimum** of one piece of that individual's photo identification documents which are original, valid and in good condition, namely driver's license or passport or any federal or provincial / territorial / state government issued photo identification document which is allowed to be recorded by law and a description of the identification document examined by you is as follows:

If passport is used as primary identification, does the passport indicate a U.S. place of birth? No____Yes____

	Type Of Identification Document*	Identification Document Number	Identification Document Place of Issue Country, Province /Territory/State	Date of Issue DD/MMM/YYYY (if available)	Expiry Date DD/MM/YYYY (if applicable)
1					
2					
	* Clear / Clean true certified photocopy of the identification documents are attached				

The identity and identification document requirements for the completion of this legal document are subject to and must adhere to the rules and regulations of the Government of Canada's *Proceeds of Crime (Money Laundering) and Terrorist Financing Act.*

Dated this ______ day of ______, 20____.

Signature of individual named in this certificate

Signature and Seal of Lawyer / Solicitor

Phone Number _____



Letter of Direction – Banker - Certificate of Identity Request

		Date:	
To:	Banker's Name	From:	Individual's Name
Re: Co	ertificate of Identity:	-	
		(Name of Individual)	
I wish	ı to establish a new personal banking relat	ionship with Bank of <i>N</i>	Montreal (the bank or BMO) in Canada.

I wish to establish a new personal banking relationship with Bank of Montreal (the bank or BMO) in Canada. I request your assistance to enable me to satisfy the rules and regulations of the Government of Canada's *Proceeds of Crime (Money Laundering) and Terrorist Financing Act,* by providing your confirmation that you have reviewed my original identification documents.

In this regard, I ask that you undertake the following activities in order to satisfy BMO's account opening requirements.

- 1 Complete the attached *Certificate of Identity Banker Newcomers to Canada Account Open Request* in my presence. Both you and I will sign the completed document.
- 2 Review my original identification document and make a clear photocopy of one piece of presented government-issued photo identification document. On the copy, record the following:

"Compared to the original and certified to be a true copy of the identification document

presented to me by ______, dated this ______ day of

_____, 20____." Sign your name and affix your title, office and the name of your

organization.

Please note: An acceptable identification document must be original, valid and in good condition. An acceptable identification document is a driver's license or passport or any other federal or provincial / territorial / state government issued photo identification document that is recordable (for example: governing legislation does not prohibit from being recorded).

3 Provide the completed and signed documentation to me so that I can mail or courier direct to BMO. All forwarded information, including presented identification documents, may be subject to reconfirmation by the bank.

Thank you in advance for your assistance with this important matter.

Yours truly,

Signature of individual requesting to open an account with Bank of Montreal

Individual's Phone Number: _____



		Date:					
То:	Lawyer/Solicitor's name	From:	Individual's Nam	le			
Re: C	ertificate of Identity:						
		(Name of Individual)					
reque <i>Proce</i>	n to establish a new personal banking relat est your assistance to enable me to satisfy teeds of Crime (Money Laundering) and Terry wed my original identification documents.	the rules and regulatio	ns of the Gove	ernment of Canada's			
In thi	s regard, I ask that you undertake the follo	wing activities in order	to satisfy BM	O's account opening requirements			
1	Complete the attached <i>Certificate of Identity – Lawyer/Solicitor – Newcomers to Canada Account Open Request</i> in my presence. Both you and I will sign the completed document.						
2	Review my original identification document and make a clear photocopy of one piece of presented photo identification document. On the copy, record the following:						
	"Compared to the original and certified to be a true copy of the identification document						
	presented to me by	, dated t	his	day of			
	, 20" Sign you organization.	ur name and affix you	title, office a	nd the name of your			
	Please note: An acceptable identification document must be original, valid and in good condition. An acceptable identification document is a driver's license or passport or any other federal or provincial / territorial / state government issued photo identification document that is recordable (for example: governing legislation does not prohibit from being recorded).						
3	Provide the completed and signed docume forwarded information, including presente by the bank.						
Thank you in advance for your assistance with this important matter.							
Yours	s truly,						

Letter of Direction – Lawyer/Solicitor - Certificate of Identity Request

Signature of individual requesting to open an account with BMO

Individual's Phone Number: _____