

**AUTHORIZATION FOR PRE-AUTHORIZED DEBITS
TERMS AND CONDITIONS**

1. You agree to participate in this pre-authorized debit plan and you authorize BMO Life Insurance Company and any successor or assign of BMO Life Insurance Company to draw a debit as set out in the BMO Life Application Form, in paper, electronic or other form including any top-ups or adjustments (a "Personal PAD"), on the account indicated on the Application Form (the "Account") at the Financial Institution indicated on the Application Form (or any other account at the Financial Institution as advised by you in accordance with paragraph 8 below) for the purpose of paying all amounts due and payable under this Agreement with BMO Life Insurance Company and you authorize the Financial Institution to honour and pay such debits.

2. You acknowledge that this authorization is provided for the benefit of BMO Life Insurance Company and the Financial Institution and is provided in consideration of the Financial Institution agreeing to process debits against the Account (or any other account at the Financial Institution as advised by you in accordance with paragraph 8 below) in accordance with the rules of the Canadian Payments Association. You agree that any direction you may provide to draw a Personal PAD, and any Personal PAD drawn in accordance with this authorization will be binding on you.

3. You may cancel or revoke this authorization at any time, either in writing or orally, within 30 days before the next Personal PAD is to be issued. You acknowledge that, in order to revoke or cancel this authorization, you must provide notice of revocation to BMO Life Insurance Company at the address indicated in the Application Form. You acknowledge that this authorization applies only to the method of payment and you agree that revocation or cancellation of this authorization does not terminate or otherwise have any bearing on the amount owing under this Agreement or any other agreement that exists between you and BMO Life Insurance Company.

4. You agree that the Financial Institution is not required to verify that any Personal PAD has been drawn in accordance with this authorization, including the amount, frequency and fulfillment of any purpose of any Personal PAD.

5. You authorize the Financial Institution, BMO Life Insurance Company or its agent to process any Personal PAD's occurring on a sporadic basis. Such Personal PAD's will be authorized by way of telephone instructions or by any other means acceptable to BMO Life Insurance Company and such instructions shall constitute valid authorization for the Financial Institution, BMO Life Insurance Company or its agent to debit the Account.

6. You may dispute a Personal PAD by providing a signed declaration to the Financial Institution under the following conditions:

- (i) the Personal PAD was not drawn in accordance with this authorization; or
- (ii) this authorization was revoked.

You acknowledge that in order to be reimbursed by the Financial Institution for the amount of a disputed Personal PAD, you must sign a declaration to the effect that either (i) or (ii) above took place and present it to the Financial Institution no later than 90 calendar days after the date on which the disputed Personal PAD was posted to the Account. You agree that, after this 90-day period, you will resolve any dispute that you may have regarding a Personal PAD solely with BMO Life Insurance Company and that the Financial Institution will have no liability to you respecting any such disputed Personal PAD.

7. You agree that delivery of this authorization to BMO Life Insurance Company constitutes delivery by you to the Financial Institution. You agree that BMO Life Insurance Company may deliver this authorization and any related documents, including a copy of this Agreement, to the Financial Institution and agree to the disclosure of any personal information, which may be contained in this authorization and Agreement to such Financial Institution.

8. You certify that the information provided with respect to the Account is accurate and that you will inform BMO Life Insurance Company, in writing, of any change in the account information provided in this authorization at least 30 days before the next due date of the Personal PAD. In the event of any such change, this authorization shall continue in respect of any new account to be used for Personal PAD's.

9. You warrant and guarantee that all persons whose signatures are required to sign on this Account have signed this Agreement. In addition, you warrant and guarantee, where applicable, that you have the authority to electronically agree to commit to this authorization by secure electronic signature and that your secure electronic signature conforms with the requirements of the Canadian Payments Association.

10. BMO Life Insurance Company may cancel your right to pay by Personal PAD: (i) immediately without notice, if any Personal PAD is not honoured by the Financial Institution because there are insufficient funds in the Account, or for any other reason whatsoever which prevents the transfer of funds, or (ii) on 30 days written notice to you to the address shown in BMO Life Insurance Company records.

11. You agree to comply with the rules of the Canadian Payments Association or any other rules or regulations which may affect the services described herein, as may be introduced in the future or are currently in effect, and you agree to execute any further documentation which may be prescribed from time to time by the Canadian Payments Association in respect of the services described herein.

12. You agree to waive the 10 calendar days pre-notification requirements of the Canadian Payments Association of the amount(s) and due date(s) debited from my Account and every time there is a change in the Amount(s) or payment date(s) of those debits.

13. It is the express wish of the parties that this Agreement and all related documents be drawn up in English. C'est la volonté expresse des parties que cette convention et tous les documents s'y rattachant soient rédigés en anglais.