

FORM 1

**APPLICATION FOR AUTHORIZATION TO ACCEPT
DEPOSITS WITHOUT BEING A MEMBER INSTITUTION OF
THE CANADA DEPOSIT INSURANCE CORPORATION**

**FOR A BANK THAT IS NOT A MEMBER OF
THE CANADA DEPOSIT INSURANCE CORPORATION**

Part A: General Applicant Information

1. Provide the full legal name of the applicant, including any form of that name in the other official language of Canada:

2. Provide the address, telephone number and facsimile number of the head office and executive office (if different) of the applicant in Canada:

3. Provide the full name, title or office, address, telephone number and facsimile number of the person who is designated to represent the applicant with respect to this application:

4. Provide the full legal name(s), address(es), telephone number(s) and facsimile number(s) of the current (or proposed) external auditor(s) of the applicant together with similar particulars of a representative of the external auditor(s) who may be contacted by CDIC:

[Title or office]

Warning: The CDIC Act provides that every director, officer, employee or agent of a bank or company and every auditor thereof who prepares, signs, approves or concurs in any account, statement, return, report or document respecting the affairs of the bank or company required to be submitted to CDIC pursuant to the CDIC Act or CDIC's By-laws and that contains any false or deceptive information is guilty of an offence. Any person who commits an offence under the CDIC Act is liable, on summary conviction, to: (a) in the case of a natural person, to a fine not exceeding \$100,000 or to imprisonment for a term not exceeding twelve months, or to both; or (b) in any other case, to a fine not exceeding \$500,000.