



## Individual Pension Plan Auxiliary Data Form

- IPP Implementation Steps: 1. Complete the Auxiliary Data Form  
2. Submit to LMC Group with each plan member's **Notice of Assessment**

### Corporate Information

Legal Name of Corporation: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

CRA 9 Digit Business No.: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Signing Authority Name & Title: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Date of incorporation: \_\_\_\_\_ Year End: \_\_\_\_\_

Will any additional companies contribute to the IPP?  Yes  No

### Plan Member Information

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

SIN: \_\_\_\_\_ Date of Hire: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Current market value of RRSP and Date: \_\_\_\_\_

RRSP contributions made in the current year: \_\_\_\_\_

### Plan Member Information (Spouse if Participating)

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

SIN: \_\_\_\_\_ Date of Hire: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Current market value of RRSP and Date: \_\_\_\_\_

RRSP contributions made in the current year: \_\_\_\_\_



**Trustee Information**

Trustee 1 Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Trustee 2 Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Trustee 3 Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**Investment Advisor Information**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

**Accountant Information**

Name: \_\_\_\_\_ Email \_\_\_\_\_

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

**Please courier the documents for signature to: (select one)  Client  Advisor  Accountant**

I, \_\_\_\_\_, hereby certify that I wish to proceed with the implementation of the IPP, agree to the terms & conditions outlined below, and will be responsible for payment for the implementation fee of \$2,500.00 and the annual administration fee of \$1,850.00 plus applicable taxes and any provincial filing fee due upon signing of documentation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Terms & Conditions:**

1. We reserve the right to increase our fees in the future to reflect inflation.
2. Provincial registration fees, applicable in Saskatchewan, Ontario, Nova Scotia, Newfoundland, New Brunswick, and Federally Regulated (OSFI) plans will be added to our invoice.
3. LMC Group reserves the right to invoice on a fee for service basis for revised documentation/filings required due to misinformation.
4. The setup of an IPP is subject to the Income Tax Act and Regulations, which can change. The calculation of the minimum and maximum tax-deductible contributions provided in this report are subject to the data provided by the prospective IPP member and, if applicable, the spouse.  
Illustrations of IPP balances are subject to investment performance and are not guaranteed.