



**Instruction : This form must be completed and signed by the liquidator of the estate\*, and sworn before a commissioner of oath, public notary or lawyer. If dividend reinvestment plan securities are included in the estate, they must be indicated on the declaration of transmission.**

**\*When a will provides for several liquidators, if a liquidator has been appointed to act alone, he/she may sign the declaration of transmission alone. However, its signature engages the responsibility of all liquidators.**

**CLIENT ESTATE**

Name of the deceased	First name of the deceased
Name of co-applicant (if applicable)	First name of the co-applicant (if applicable)

**DECLARER #1**

Last name	First name and middle name (or initial)
Address (number, #apt, street, city, province/state, country, postal code)	

**DECLARER #2 (if applicable)**

Last name	First name and middle name (or initial)
Address (number, #apt, street, city, province/state, country, postal code)	

**DECLARER #3 (if applicable)**

Last name	First name and middle name (or initial)
Address (number, #apt, street, city, province/state, country, postal code)	

**Acting as :**

- Liquidator(s)/Executor                       Estate Administrator(s)                       Designated beneficiary(ies) of a plan owned by the deceased (the "personal representative(s)")

Solemnly declares:

1. The deceased, during his lifetime, was living and domiciled in \_\_\_\_\_  
(full address of the deceased at the time of death)

2. The deceased died at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(place of death) (month)

3. At the time of his death, the deceased was :

- Single
- Common law spouse
- Married/Civil union                      Date of marriage/civil union: \_\_\_\_\_  
(YYYY-MM-DD)
- Marriage contract/Prenuptial Agreement
- Separated/Divorced                      Date of separation/divorce: \_\_\_\_\_  
(YYYY-MM-DD)
- Widowed                      Date of death of spouse: \_\_\_\_\_  
(YYYY-MM-DD)

**Please include the marriage contract, judgment of separation or irrevocable judgment of divorce or divorce certificate if applicable.**



**DECLARATION OF TRANSMISSION (DEATH)  
(Ontario Only – Remote Oath)**

4. Testamentary situation of the deceased:

- Without a will/testament (ab intestat)
- Testamentary provisions in the marriage contract
- Will/Testament
  - With codicil
  - Without codicil
  - Probated
  - Un-probated given the face value of the estate

**Please include any prenuptial agreement, marriage contract, will, codicil, judgment or verification document.**

5. Description of the deceased's assets in the records of Laurentian Bank Securities Inc. (hereinafter "LBS"):

**Description of assets**

Account number	Account Type	Value as of today

**Guaranteed Investment Certificate (GIC), Bonds**

Account number	Description of the GIC (Issuer, interest rate, maturity)	Quantity	Re-registration or cashing out



6. Treatment of securities in the account:

Rollover to spousal account (registered account only)

Spouse's account number : \_\_\_\_\_

Financial Institution: \_\_\_\_\_ (Provide a T2033 form if transferring to another financial institution)

market value                       book value

Rollover to the designated beneficiary on account (registered account only)

Beneficiary account number : \_\_\_\_\_

Financial Institution : \_\_\_\_\_ (Provide a T2033 form if transferring to another financial institution)

Total transfer to the following account held at LBS : \_\_\_\_\_

Liquidation and electronic transfer of funds to an estate account in another financial institution (Provide a cheque specimen)

Liquidation and issuance of a cheque payable to the estate

Registration in the following name : \_\_\_\_\_ and delivery.

Other : \_\_\_\_\_

**Please include the completed and signed T2033 form if a RRSP or RRIF is transferred to another financial institution.**

**\*Please include a division of assets if there is a division of assets between multiple heirs.**

7. The undersigned hereby release(s) LBS and its affiliates from any and all action, cause of action, claim, covenants, obligation and demands that the undersigned may have against LBS and an affiliate as a result of the carrying out of the instructions contained herein. This release binds the undersigned and his heirs, executors, administrators and representatives.

8. For and in consideration of the payment or transfer by LBS of the said moneys and interest to the undersigned, the undersigned, for themselves, and each of their heirs, executors, and administrators jointly and severally covenant and agree with LBS their successors and assigns that they, from time to time and at all times indemnify and save harmless and keep indemnified LBS and any of its affiliates of, from and against all actions, suits causes of action and suit, claims, and demands which now or may at any time hereafter be made, brought or claimed against LBS in respect of the aforesaid products held by the deceased.

**SIGNATURE**

**I (We) swear this solemn declaration to conscientiously believing it be true to the best of my (our) knowledge, knowing that it carries the same binding force as if it had been made under oath and by virtue of the *Canada Evidence Act*.**

\_\_\_\_\_  
Signature of Declarer #1

\_\_\_\_\_  
Date (YYYY-MM-DD)

\_\_\_\_\_  
Signature of Declarer #2

\_\_\_\_\_  
Date (YYYY-MM-DD)

\_\_\_\_\_  
Signature of Declarer #3

\_\_\_\_\_  
Date (YYYY-MM-DD)

**REMOTE OATH (ACCEPTED IN ONTARIO ONLY)**

Declared remotely by \_\_\_\_\_ stated as being located in the city/town of \_\_\_\_\_ in the (County/Regional Municipality) of \_\_\_\_\_ before me at the city/town of \_\_\_\_\_ in the (County/Regional Municipality) of \_\_\_\_\_ on \_\_\_\_\_ (date).

\_\_\_\_\_  
Signature of the Commissioner for Oaths, the notary public or lawyer

\_\_\_\_\_  
Date (YYYY-MM-DD)

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Registration number/title