

CHIP Home Income Plan

Verico Canada First Mortgage Inc. Client Referral Sheet



When you have completed this form and obtained your client(s) signature(s), please fax it to 1-866-718-2447. Once completed and faxed, please keep a copy on file.

Inform your client that CHIP will contact them within 1 business day. If your clients have questions about the CHIP Home Income Plan™, call 1-866-324-2447 to speak with their CHIP Home Income Plan Representative.

Step 1 – Information About You (*Required Information)

Customer #1 (Customer must be at least 60 years of age)

Mr. Mrs. Ms. Dr. Rev. *

First Name * _____

Last Name * _____

Birth Date * _____

Street Address * _____

Province * _____

Telephone * _____

Customer #2 (Customer must be at least 60 years of age)

Mr. Mrs. Ms. Dr. Rev.

First Name _____

Last Name _____

Birth Date _____

City * _____

Postal Code * _____

Email _____

Step 2 – Information About Your House (*Required Information)

Type of Home * Detached Semi-Detached Modular Home Duplex
 Townhouse Semi-Detached (QC) Rural Acreage Triplex
 Condo-Apartment Condo-Townhouse Mobile Home

Market Value of Home * \$ _____

Amount of Deferred Property Tax (BC Only) * \$ _____

Amount of Existing Mortgage, Secured Line of Credit * \$ _____

Expected Use of Funds (check all that apply)

Major Purchase Travel Health Care Home Renovation
 Income/Investment Pay Debt Estate Planning Family Gifts

Step 3 – Broker Information (*Required Information)

First Name * _____ Last Name * _____

Title * _____ BDM Name * _____

City * _____ Province * _____

Postal Code _____ Telephone Number * _____

Email Address * _____ Fax Number * _____

Authorization

I/we direct Verico Canada First Mortgage Inc. (the "Referrer") and/or its domestic subsidiaries to submit this completed Referral Sheet (the "Sheet") to Canadian Home Income Plan Corporation ("CHIP") in connection with a CHIP Home Income Plan. The Sheet has been completed using information provided by me/us and I/we confirm that the information contained in the Sheet is correct. In addition to providing the Sheet to CHIP, I/we also authorize CHIP to disclose to the Referrer details of any CHIP Home Income Plan that CHIP has granted to me so that the Referrer may serve me better, including assisting me with investing the proceeds of the Plan. I/we have been advised that CHIP and the Referrer have a referral agreement under which CHIP pays a fee to the Referrer in the event that CHIP enters into a CHIP Home Income Plan with me/us. I/we will settle any claims and disputes relating to the Sheet or any CHIP Home Income Plan arising from the Sheet directly with CHIP.

Date * _____

Date _____

Customer #1 Signature * _____

Customer #2 Signature _____

Customer Name * _____

Customer Name _____