

FORM 3

**ATTESTATION OF TOTAL AMOUNT HELD IN FEDERALLY REGULATED
LOCKED-IN PLANS**

1. **To:** (insert name of financial institution) _____

2. **List of applicable federally regulated locked-in plans:** (Please identify all locked-in registered retirement savings plan, life income fund, restricted locked-in savings plan or restricted life income fund which you own including any that are held by financial institutions other than the one identified above).

(a) _____

(b) _____

(c) _____

3. **Attestation**

I, (insert name) _____, of (insert address) _____, in the city of _____, in the province of _____, attest to the following:

I own the federally regulated locked-in plan(s) identified in Item 2. On the day on which I sign this Attestation the total value of all of the locked-in plan(s) identified in Item 2 is \$_____.

On the day on which I sign this Attestation the total value of all of the locked-in plan(s) identified in Item 2 is \$_____.

The total value of all locked-in plan(s) identified in Item 2 is less than 50% of the Year's Maximum Pensionable Earnings as defined in the *Pension Benefits Standards Act, 1985*.

4. **Signatures**

Sworn before me, on the _____ day of _____, 20____
at _____, in the province of _____

Signature of applicant _____

A notary public, commissioner or other person authorized to take affidavits