NATIONAL BANK
INSURANCE

800 Saint-Jacques Street, office 16701, Montreal, Quebec H3C 1A3

INSURANCE APPLICATION FOR CONSUMER LOAN - PERSONAL LINE OF CREDIT

Life, critical illness and accidental dismemberment, disability
No. 70008C20 (2021-05-30)

REASON FOR INSURANCE APPLICATION

☐ New application ☐ Refinancing a National Bank loan - Previous loan No. _____ ☐ Adding new coverage ☐ Adding an insured

YOUR PERSONAL INFORMATION

Applicant 1

Client No. _____ Date of birth (YYYY MM DD) _____ Sex: ☐ M ☐ F

Last name _____ First name _____

Complete address, including postal code _____

Email _____

Applicant 2

Client No. _____ Date of birth (YYYY MM DD) _____ Sex: ☐ M ☐ F

Last name _____ First name _____

Complete address, including postal code _____

Email _____

LOAN INFORMATION

Reference No. _____ Authorized loan amount _____ Approval date _____

CHOICE OF AMOUNT AND INSURED PAYMENT

For life insurance

☐ Authorized loan amount (cannot exceed $500,000) or ☐ Chosen insured amount: _____ (cannot exceed the authorized amount, or $500,000)

For critical illness and accidental dismemberment insurance

Amount selected for life insurance (cannot exceed $150,000)

For disability insurance

☐ 2% of the loan balance used (cannot exceed $2,000/month) or ☐ Selected insured amount, in multiples of $250: _____ (cannot exceed 2% of the balance used, or $2,000/month)

ELIGIBILITY

You can apply for life insurance if:
- You are between the ages of 18 and 64; and
- You are living in Canada or in the United States; and
- You are a borrower, co-borrower, guarantor or endorser of the National Bank loan.

You can apply for critical illness and accidental dismemberment insurance if:
- You have signed up for life insurance.

You can apply for disability insurance if:
- You have signed up for life insurance; and
- You have worked 60 or more remunerated hours over the past 4 weeks or, if you are self-employed, you generated a gross employment income of $10,000 or more over the last fiscal year; and
- You can confirm that **you are not** on unemployement, a leave of absence or unemployed, and that **you are not receiving** income replacement benefits (e.g., benefits as a result of a work-related accident or parental leave).

Applicant 1

Current employer's name _____ Employed since (YYYY MM DD) _____

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Applicant 2

Current employer's name _____ Employed since (YYYY MM DD) _____

TOBACCO USE OVER THE PAST 12 MONTHS

Please answer this question honestly and accurately. Otherwise, your insurance will be cancelled.

Have you used tobacco or a nicotine replacement product, including electronic cigarettes, at least once over the past 12 months?	Applicant 1		Applicant 2	
	Yes	No	Yes	No
	☐	☐	☐	☐

APPLICATION – WAIVER – INELIGIBILITY – MANDATORY SIGNATURE

Applicant 1	I request	I waive	I am not eligible for
Life insurance	☐	☐	☐
Critical illness and accidental dismemberment insurance	☐	☐	☐
Disability insurance	☐	☐	☐

Date (YYYY MM DD) _____ **X** _____ Your Signature Applicant 1 *(ID :16334P21)*

Applicant 2	I request	I waive	I am not eligible for
Life insurance	☐	☐	☐
Critical illness and accidental dismemberment insurance	☐	☐	☐
Disability insurance	☐	☐	☐

Date (YYYY MM DD) _____ **X** _____ Your Signature Applicant 2 *(ID :16334P22)*

INSURABILITY - MANDATORY SIGNATURE

IMPORTANT

Answer honestly and accurately

Answering "Yes" to one of the questions does not mean coverage will automatically be declined.

Any false statement, whether intentional or not, could result in the denial of a claim or cancellation of your insurance.

If you are unsure how to answer, it is better to answer "Yes." One of our representatives will then contact you to complete a detailed questionnaire in order to clarify the information.

Identify the category to which you belong using this table:

AMOUNT	AGE	PROCESS
From $0 to $50,000	18 to 54	**YOU ARE INSURED without having to provide additional proof of insurability.** **Go to section B) ADDITIONAL INFORMATION.**
From $0 to $50,000	55 to 64	Answer the questions in the **A) HEALTH DECLARATION** section. **In case of doubt:** **> tick "Yes," and** **> complete section B) ADDITIONAL INFORMATION**; One of our representatives will contact you to complete a detailed questionnaire. **If you answered "No" to all the questions in the HEALTH DECLARATION, YOU ARE INSURED based on the accuracy of the information you provided. You don't need to provide additional proof of insurability.**
From $50,001 to $500,000	18 to 64	

A) HEALTH DECLARATION

Answer the following questions.

Answer "Yes" if at least one of the situations applies to you:

a) In the past 3 years:

	Applicant 1		Applicant 2	
	Yes	No	Yes	No
• **Have you consulted, had a follow-up or been treated by a physician or another health care professional, or have you taken medication for or had symptoms related to or do you suffer from any of the following health problems?**	☐	☐	☐	☐

- Heart or circulatory disorders
- Stroke
- Chest pains or angina
- Blood disorders including cholesterol
- Blood pressure disorders
- Muscular dystrophy
- Multiple sclerosis
- Acquired Immune Deficiency Syndrome (AIDS), Human Immunodeficiency Virus (HIV) or any other disease or disorder of the immune system
- Tumour or cancer
- Digestive problems
- Liver disorders
- Intestinal disorders
- Kidney disorders
- Urinary tract disorders
- Lung or respiratory disorders (including sleep apnea)
- Genital, prostate or breast disorders
- Neurological disorders
- Diabetes or glucose intolerance
- Psychological or psychiatric disorders (including depression, anxiety, adjustment disorder, etc.)

and for any of the following problems, only if you are applying for disability insurance				
	☐	☐	☐	☐

- Fibromyalgia or chronic fatigue syndrome
- Carpal tunnel
- Muscle, joint or bone disorders (including sprains, tendonitis, bursitis, epicondylitis, osteoarthritis, arthritis, etc.)
- Neck, back or spinal column problems

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• **Have you used drugs (including marijuana)? Have you used narcotics exceeding the recommended dosage? Have you received treatment or joined a rehabilitation program because of your alcohol consumption? Have you been advised by a health care professional to reduce your consumption of alcohol? Do you have more than 4 glasses of alcohol per day (28/week)?**	☐	☐	☐	☐
b) In the past 3 years, have you been hospitalized due to an accident or illness for more than 48 consecutive hours?	☐	☐	☐	☐
c) In the past 3 years, have you applied for life, disability or critical illness insurance that was subject to additional premiums or refused or issued with a restriction?	☐	☐	☐	☐
d) If you are only applying for critical illness insurance, please also complete questionsa), b) and c) Has one or more members of your biological family (father, mother, brothers or sisters) suffered from diabetes, cancer, a stroke or heart disease before the age of 60?	☐	☐	☐	☐

I acknowledge that I have read and answered the questions in the Health Declaration.

Applicant 1

Date (YYYY MM DD) _____ **X** _____ Applicant's Signature 1 *(ID :16334P31)*

Applicant 2

Date (YYYY MM DD) _____ **X** _____ Applicant's Signature 2 *(ID :16334P32)*

B) ADDITIONAL INFORMATION (To be completed by all clients)

A representative of National Bank Life Insurance Company may contact you. Please indicate the best time and telephone number at which to reach you.

Applicant 1 If a detailed questionnaire is required, you may choose the desired language.

Please indicate your preference: _____

☐ Day _____ Phone No. _____ Ext. ☐ Evening _____ Phone No. _____ Ext.

Applicant 2 If a detailed questionnaire is required, you may choose the desired language.

Please indicate your preference: _____

☐ Day _____ Phone No. _____ Ext. ☐ Evening _____ Phone No. _____ Ext.

COLLECTION, USE AND DISCLOSURE OF YOUR PERSONAL INFORMATION

The insurer collects, uses and discloses your personal information to:

- Confirm your identity
- Provide the loan insurance requested
- Prevent fraud, manage risk and comply with laws
- Help the insurer improve and develop its products and services and better understand its clients
- Enable the insurer, National Bank of Canada or its subsidiaries, to present offers and other promotional material from business partners, unless you choose not to receive them
- Any other purpose set out in the Privacy Policy of National Bank and its subsidiaries available at **https://www.nbc.ca/privacy-policy.html**

The policy mentions, among others, which information the Insurer collects, to whom it is communicated, and how it is used and stored, what your options and rights are, and how to manage your consent.

In order to verify your insurability for loan insurance, the Insurer may also collect information from any doctor, hospital, clinic, paramedical firm, service provider, agent, insurance company, or any other organization that holds information on you or your health status, including MIB, LLC, an organization that maintains a database of applicant information that insurers may consult as part of their underwriting insurance or a claim (see Notice concerning MIB, LLC).

In addition, the Insurer may also disclose any information about your health or other relevant information about you to MIB, LLC or its reinsurers.

Your personal information will be kept by the Insurer and its subsidiaries for a reasonable period of time following the end of the business relationship to comply with their legal obligations.

If you have any questions, please contact the Access to Personal Information Officer by writing to

800 St-Jacques, Suite 16701,
Montreal, Quebec H3C 1A3.

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YOUR DECLARATION AND AUTHORIZATION - MANDATORY SIGNATURE ON THE NEXT PAGE

Information that you must read and understand

- I can cancel the insurance within 30 days of signing the application. If I do so, the Insurer will refund all the premiums paid, if any, and the insurance will be considered void.
- Insurance is optional and I can cancel it at any time.
- I am bound by all the provisions of the group insurance policy.
- I confirm it is my wish that this insurance application and the insurance certificate as well as all related documents be drawn up in English. *Je confirme ma volonté que cette proposition d'assurance et le certificat d'assurance ainsi que tous les documents s'y rattachant soient rédigés en anglais.*
- **(Quebec only) The French version of this insurance application and the insurance certificate is available here: assurances-bnc.ca/documentation.html, under the Personal Line of Credit section. I confirm having received this version. (Québec seulement)** ***La version française de cette proposition d'assurance et du certificat d'assurance est disponible ici: assurances-bnc.ca/documentation.html, sous la section Assurance prêt Marge de crédit. Je confirme avoir reçu cette version.***

Authorization for your personal information

- The information that I provided to the insurer as part of this application are correct and I hereby undertake to advise the Insurer immediately in writing of any change in my personal information so that it can keep my file up to date.
- I hereby authorize the insurer to use any information it has about me.
- I authorize the insurer and National Bank of Canada to use my social insurance number for administrative purposes. I may revoke my authorization at any time by contacting the insurer.
- I have read the conditions set out in the "Collection, use and disclosure of your personal information" section in this application and I accept them.
- I have read the Insurer's Privacy Policy.
- I understand that signing up for loan insurance means that I accept the conditions of this Policy.
- I understand that I can limit the collection, use and disclosure of my personal information as set out in this Policy.
- If I have provided personal information about another person, I confirm that I am authorized to do so.
- I authorize the insurer and its reinsurers to collect information pertaining to me from any physician, hospital, clinic, paramedical firm, service provider, agent, insurance company, MIB, LLC or any other organization or institution.
- I authorize the insurer or its reinsurers to disclose any information about me to the MIB, LLC (Medical Information Bureau).
- I authorize the insurer to disclose my contact information and any changes to it that I may subsequently provide, as well as my personal and financial information to National Bank of Canada and its subsidiaries so that they may send me offers, information or invitations likely to be of interest to me.
- I authorize the insurer to disclose my information to its service providers when insurance-related services are available.

Pre-authorized debit application (PADA)

☒ Personal ☐ Business

Frequency and amount of debits

- I authorize the Insurer to debit the insurance premiums each month from the bank account indicated below.
- If no account number is indicated in the space provided, I understand that the insurance premiums will be debited from my personal line of credit without notice.

Payment authorization and information about the bank account

Name of the financial institution where the account is held

Account No. | Institution No. | Transit

Payee
National Bank Life Insurance Company.
800 Saint-Jacques Street, office 16701, Montreal, Quebec H3C 1A3
Telephone: 1-877-871-7500 Fax: 514-394-6604

- I can change the account for the collection of my insurance premiums by contacting the Insurer at 1-877-871-7500.
- The amount of each debit will vary based on a determined premium rate.

Waiver, changes and recourse

- **I waive any other confirmation before the first payment.**
- **I waive my right to receive notification should the amount of the debit change.**
- I will notify the insurer at least 5 days before the next scheduled debit, of any changes to the bank account information or to the date of the debit.
- I may revoke my authorization at any time, subject to providing 30 days' notice. If I need additional information on the cancellation process, I may contact National Bank, the insurer or go to **www.payments.ca**.
- I have certain recourse rights if a debit does not comply with this agreement. For example, I am entitled to reimbursement of any debit that is not authorized or is not consistent with this current agreement. If I need additional information on my recourse rights, I may contact National Bank, the insurer or go to **www.payments.ca**.

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YOUR COMMITMENT TO ACCURACY OF INFORMATION

- **I confirm that the answers and information provided in this application, including the sections on "Eligibility," "Tobacco use over the past 12 months" and "INSURABILITY" are accurate and complete.**
- **I understand that any omission or misrepresentation may result in the cancellation of my insurance.**
- I have received details on the coverage and the procedure to be followed to submit a claim.
- I have read all the information in this insurance application and the certificate of insurance.
- I confirm that I have received the summary and (in Quebec only) the fact sheet.
- I understand that this insurance is optional. I choose the coverage(s) under this insurance that best suits my situation and financial needs.

Date (YYYY MM DD)	X Applicant's Signature 1 *(ID :16334P51)*	Date (YYYY MM DD)	X Applicant's Signature 2 *(ID :16334P52)*

DECLARATION OF WITNESS

I declare that I was present when this application was completed and witnessed all signatures thereon. For enrolment via phone or using an electronic signature: I have provided clear instructions on how to complete and sign this application. I have submitted the summary, the certificate of insurance and (in Quebec only) the fact sheet.

Date (YYYY MM DD)	Employee's first and last name	Transit

No employee of National Bank of Canada or any other person may amend the provisions of this insurance application or the certificate of insurance.
All amended or incomplete forms shall be considered null and void.

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NATIONAL BANK INSURANCE

CONSUMER LOAN INSURANCE
PERSONAL LINE OF CREDIT INSURANCE CERTIFICATE
Group insurance policy No. 70008C20 (2021-05-30)

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Who we are

National Bank Life Insurance Company, a subsidiary of National Bank of Canada. We are friendly and dedicated, and here to help.

What we do

We create insurance products for the different types of loans offered by National Bank and to meet your coverage needs.

Why we do it

For you! So that you can enjoy life with peace of mind, knowing we are here for you if an unfortunate event happens.

1. Before we get started

1.1 Keep the following 6 rules in mind as you read this document:

> "We", "us" and "our" designate the insurer: National Bank Life Insurance Company.

> "You" and "your" designate the insured, i.e., the person who applied for loan insurance, meets the eligibility and insurability criteria and received a copy of this certificate.

> We only insure loans granted by National Bank of Canada. This is the institution we are referring to when we mention "the Bank" or "National Bank".

> In this certificate, the word "loan" refers to your personal line of credit.

> For ease of reading, the singular includes the plural, and the masculine includes the feminine, and vice versa.

> Words that are defined in an information box have the same meaning in the entire certificate.

1.2 Your insurance contract includes 2 documents:

> Your copy of the insurance application: the form you completed and signed to apply for insurance, regardless of the method used (handwritten signature, voice signature, e-signature).

With this document, you can confirm the information that you gave us and we used, as applicable, to review your application and render a decision (the Bank also has a copy); and

> Your insurance certificate, which sets out the details of your coverage as well as your rights and obligations.

These two documents should be kept in a safe place to refer to them as needed!

Note: The Summary also provides valuable information about your loan insurance!

1.3 Insurance is optional

You are not required to enrol in loan insurance.

> If you decide to do so, you can cancel the insurance at any time.

> If you cancel within 30 days of signing the insurance application, we will reimburse you all the premiums paid and the insurance will be considered never having been in effect.

1.4 You cannot designate a beneficiary

Any benefits we provide are first paid to the Bank to be applied in full to the insured portion of your loan. The payment terms and conditions are explained to you in the "Amount we pay..." section of each type of coverage.

2. Conditions to be insured

2.1 You must meet specific criteria (eligibility conditions)

When signing the insurance application, you must:

For life insurance

> Be between the ages of 18 and 64;

> Be a resident of Canada or the United States; and

> Be a borrower, co-borrower, guarantor or endorser of the loan targeted by the insurance application.

For critical illness and accidental dismemberment insurance

> Have enrolled in life insurance.

For disability insurance

> Have enrolled in life insurance; and

> Be a salaried employee and have worked 60 or more remunerated hours over the past 4 weeks; or

> If you are self-employed, have generated a gross employment income of $10,000 or more during your previous fiscal year.

You CANNOT apply for disability insurance if you:

> **Are unemployed;**

> **Are on leave of absence;**

> **Don't have a job; or**

> **Receive income replacement benefits (because of parental leave, work accident, etc.).**

However, you could apply to add this coverage once you have returned to work.

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2.2 We will ask you questions about your health and lifestyle (insurability)

Depending on your age and the insurance amount requested, you may have completed the health declaration or answered the simplified question in the insurance application. If we need more information on your health and lifestyle, we could ask you to meet these requirements or undergo the following tests:

- Detailed questionnaire completed by phone
- Paramedical examination conducted by a nurse
- Physical examination
- Electrocardiogram
- X-ray
- Blood test
- Urine test
- Any other test, including screening for HIV (AIDS) or certain drugs or medication

The information collected through these various means enables us to determine whether we can accept your insurance application. **It is therefore important to answer honestly and to the best of your knowledge.**

2.2.1 Any false statement about your medical history could result in the cancellation of your insurance

When making a claim, certain conditions can lead us to check the information you provided at enrolment about your health, family and medical history as well as your lifestyle.

If the information collected as part of the claim is different from the information you provided at enrolment and on which we based ourselves to accept your insurance application, we could cancel your insurance retroactive to its effective date. Any claim would then be impossible.

IMPORTANT TO KNOW

- We pay for any examination we require. If you decide to undergo a medical examination we have not requested, you will be responsible for the cost.
- If we do not obtain the information required to review the application, we will terminate the analysis of your application.
- Your application will be refused if the information about your health or lifestyle prevents us from insuring you. In that case, we would reimburse you any premiums you may have paid.
- In any case (acceptance or refusal), we will notify you in writing of our decision within 30 days of receiving all your insurability information.

2.2.2 Any false statement about your tobacco consumption will result in the cancellation of your insurance

If you smoke, even occasionally, or use nicotine replacement products - including electronic cigarette - you sign the insurance application.

Once the insurance is in effect (but not during a claim), if you realize that you have given incorrect information about your consumption of tobacco or nicotine replacement products - including electronic cigarette - you can rectify this by contacting one of our customer service representatives.

It should also be noted that making a false declaration about tobacco consumption when making a claim can have significant consequences. If you declare yourself to be a non-smoker when you sign the application and the information we obtain as part of the claim shows that you were a smoker at that time, we will refuse the claim and cancel your insurance retroactive to its effective date.

IMPORTANT TO KNOW

In order to be considered a non-smoker, you must not have used tobacco or nicotine replacement products - including electronic cigarette - of any kind during the 12 months preceding the date the insurance application was signed.

2.2.3 You are covered against certain accidents while your file is under review

We offer you coverage in case of an accident while we are in the process of analyzing your application, until such time as we render a decision or close your file.

This accident coverage is provided at no additional charge and is based on the coverage you have chosen.

Benefits are only payable if the accident causing the death, disability or mutilation occurs after the date on which the insurance application is signed.

See subsection 9.1.

However, if a non-accidental event occurs, we will finalize the review of the insurance application. If it is accepted, we will process the claim.

In this certificate:

By **"accident"**, we mean an event that arises exclusively from causes external to the body. It occurs in a violent, unexpected and involuntary way, and causes bodily injury. A physician must establish that the accident is truly the source of the bodily injury, not an illness or other cause.

By **"illness"**, we mean a deterioration in health requiring regular, ongoing and curative medical care actively provided by a physician or other practitioner belonging to a health profession order. Such care must be considered satisfactory by the insurer.

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3. Coverage offered and maximum amount we pay for each type of coverage

The loan insurance provided by National Bank Life Insurance includes 3 types of coverage:

- Life insurance
- Critical illness and accidental dismemberment insurance
- Disability insurance

You may have opted to enrol in all types of coverage or just one or two, as needed. Your selection is indicated on the insurance application you signed, a copy of which was given to you with this certificate.

You can cover your personal line of credit for the amount you wish, provided the amount selected does not exceed the authorized amount for your personal line of credit, i.e., the amount the Bank has agreed to lend you, or the maximum amount by coverage type as indicated in the following table.

Coverage	Maximum amount
Life insurance	$500,000
Critical illness and accidental dismemberment insurance	$150,000
Disability insurance	$2,000/month

The maximum amount indicated corresponds to the maximum payable through coverage for all insureds on the loan.

IMPORTANT TO KNOW

The maximum insurance amount you can have with National Bank Life Insurance is $5,000,000 for all insurance products.

If you are paying premiums for an amount higher that the maximum amount per type of coverage, we will reimburse you the difference in premiums.

The maximum amount set out in case of disability does not include the reimbursement of insurance premiums.

4. Life insurance

Life insurance covers both natural death and accidental death.

4.1 Amount we pay in case of death

In case of accidental death: We pay the Bank the insured balance as of the date of death, plus any interest accrued since the date of death.

In case of non-accidental death: We pay the Bank benefits equal to the lesser amount between:

- The insured loan balance on the date of death; or
- The loan's average daily balance over the last 12 months multiplied by 110% (if the insurance has been in effect less than 12 months, the average daily balance since the insurance start date multiplied by 110%)

For life insurance coverage, the insured balance is the loan balance used calculated on the date of death.

It cannot be higher than the lesser of the following amounts:

- The insurance amount selected at enrolment (the authorized amount or the insured's amount choice); or
- The maximum amount set out for life insurance coverage ($500,000).

Mark and Louise have had a personal line of credit for a few years. Fortunately, they decided to cover their debt with loan insurance so Mark is relieved not to have to bear the financial burden alone when Louise dies.

The amount we pay after accepting the claim is calculated as follows:

Loan amount insured with life insurance at enrolment: $45,000

Loan balance at death: $24,800

Average daily balance over the 12 months prior to death X 110%: $22,375

Amount we pay if death is accidental: $24,800

Amount we pay if death is not accidental: $22,375

If premium payments are overdue on the date of death, these premiums are deducted from the amount we pay.

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4.2 CAUTION - EXCLUSION in the event of suicide within 2 years of the signature of the insurance application

We will not pay any amount if your death is a result of suicide occurring within 2 years of the date your insurance took effect (see subsection 9.1).

Our liability will therefore be limited to reimbursing all the premiums paid. In that case, the insurance is cancelled retroactive to its effective date.

Consult section 8 to read about the other life insurance exclusions.

5. Critical illness insurance

We cover 3 types of critical illness:

- Cancer (life threatening);
- Heart attack; and
- Stroke.

CAUTION: The critical illness diagnosis must match the definition set out below.

5.1 What we mean by cancer (life threatening)

To be covered by this certificate, the cancer diagnosed must be a danger to your life and meet the following definition: definite diagnosis of a tumour, which must be characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue.

Types of cancer include carcinoma, melanoma, leukemia, lymphoma, and sarcoma.

This definition does not include the following:

- Carcinoma in situ
- Stage 1A malignant melanoma (melanoma less than or equal to 1.0 mm in thickness, not ulcerated and without Clark level IV or level V invasion)
- Any non-melanoma skin cancer that has not metastasized
- Stage A (T1a or T1b) prostate cancer

The diagnosis of cancer must be made by a specialist.

In this certificate, by “specialist”, we mean a licensed medical practitioner who has been trained in the specific area of medicine relevant to the covered critical illness or accidental dismemberment condition for which benefit is being claimed. They must be certified by a specialty examining board.

In the absence or unavailability of a specialist, and as approved by the insurer, a condition may be diagnosed by a qualified medical practitioner practising in Canada or the United States.

The term specialist includes, but is not limited to: cardiologist, neurologist, oncologist, ophthalmologist, burn specialist and internist.

The specialist must not be the insured, the spouse or a relative of the insured or a business associate of the insured or of the insured's spouse.

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5.1.1 CAUTION - EXCLUSIONS regarding cancer

We will not pay any benefits for cancer if, within 90 days of the insurance effective date, you have:

- **Presented signs symptoms or been subject to investigations that lead to a diagnosis of cancer (covered or excluded by the insurance certificate), regardless of the date the diagnosis is made; or**
- **Received a diagnosis of cancer (covered or excluded by the insurance certificate).**

Furthermore, we will not pay any benefits in the following cases:

- **Lesions described as benign, pre-malignant, uncertain, borderline, non-invasive, carcinoma in-situ (Tis), or tumours classified as Ta**
- **Malignant melanoma skin cancer that is less than or equal to 1.0 mm in thickness, unless it is ulcerated or is accompanied by lymph node or distant metastasis**
- **Any non-melanoma skin cancer, without lymph node or distant metastasis**
- **Prostate cancer classified as T1a or T1b, without lymph node or distant metastasis**
- **Papillary thyroid cancer or follicular thyroid cancer, or both, that is less than or equal to 2.0 cm in greatest diameter and classified as T1, without lymph node or distant metastasis**
- **Chronic lymphocytic leukemia classified less than Rai stage 1**
- **Malignant gastrointestinal stromal tumours (GIST) and malignant carcinoid tumours, classified less than American Joint Committee on Cancer (AJCC) Stage 2**

For the purposes of this certificate, the terms "Tis, Ta, T1a, T1b, T1 and AJCC Stage 2" are to be applied as defined in the American Joint Committee on Cancer (AJCC) Cancer Staging Manual (7th edition, 2010).

For the purposes of this certificate, the term "Rai staging" is to be applied as set out in KR Rai, A Sawitsky, EP Cronkite, AD Chanana, RN Levy and BS Pasternack: "Clinical staging of chronic lymphocytic leukemia", *Blood* 46:219, 1975.

Consult section 8 to read about the other critical illness insurance exclusions.

5.2 What we mean by heart attack

To be covered by this certificate, a heart attack must meet the following definition: definite diagnosis of a heart attack resulting from the death of a segment of the heart muscle due to obstruction of blood flow, that results in a rise and fall of biochemical cardiac markers to levels considered diagnostic of myocardial infarction, with at least one of the following:

- Heart attack symptoms
- New electrocardiogram (ECG) changes consistent with a heart attack
- Development of new Q waves during or immediately following an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty

The diagnosis of heart attack must be made by a specialist (see the definition of "specialist" on p. 6).

5.2.1 CAUTION - EXCLUSIONS regarding heart attacks

We will not pay any benefits in the following cases:

- **Elevated biochemical cardiac markers as a result of an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty, in the absence of new Q waves**
- **ECG changes suggesting a prior myocardial infarction, which do not meet the criteria for a heart attack as set out in this certificate**

Consult section 8 to read about the other critical illness insurance exclusions.

5.3 What we mean by stroke

To be covered by this certificate, the stroke (cerebrovascular accident resulting in persistent neurological deficits) must meet the following definition: definite diagnosis of an acute cerebrovascular event caused by intra-cranial thrombosis, haemorrhage, or embolism, with:

- Acute onset of new neurological symptoms, and
- New objective neurological deficits on clinical examination,

persisting continuously for more than 30 days following the date of diagnosis. These new symptoms and deficits must be corroborated by diagnostic imaging testing showing changes that are consistent in character, location and timing with the new neurological deficits.

The diagnosis of stroke must be made by a specialist. (see the definition of "specialist" on p. 6).

For purposes of the policy, neurological deficits must be detectable by a specialist and may include, but are not restricted to:

- measurable loss of hearing
- measurable loss of vision
- measurable changes in neuro-cognitive function
- objective loss of sensation
- paralysis
- localized weakness

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- dysarthria (difficulty with pronunciation)
- dysphasia (difficulty with speech)
- dysphagia (difficulty swallowing)
- impaired gait (difficulty walking)
- difficulty with balance
- lack of coordination, or
- new-onset seizures undergoing treatment.

Headache or fatigue will not be considered a neurological deficit.

5.3.1 CAUTION - EXCLUSIONS regarding strokes

We will not pay any benefits in the following cases:

- **Transient ischaemic attacks**
- **Intracerebral vascular events due to trauma**
- **Ischaemic disorders of the vestibular system**
- **Death of tissue of the optic nerve or retina without total loss of vision of that eye, or**
- **Lacunar infarcts which do not meet the definition of stroke as described above**

Consult section 8 to read about the other critical illness insurance exclusions.

5.4 Amount we pay if one of the critical illnesses covered is diagnosed

In the event of critical illness, we pay the Bank an amount equal to the lesser of the following amounts:

- The insured loan balance on the date of the critical illness diagnosis; or
- The average daily balance of the loan over the last 12 months multiplied by 110% (if the insurance has been in effect less than 12 months, the average daily balance since the insurance start date multiplied by 110%).

For critical illness and accidental dismemberment coverage, the insured balance is the loan balance used calculated on the date of the critical illness diagnosis.

It cannot be higher than the lesser of the following amounts:

- The life insurance amount selected at enrolment (the authorized amount or the insured's choice of amount); or
- The maximum amount set out for critical illness and accidental dismemberment insurance coverage ($150,000).

On a beautiful fall morning, Michael collapses while he is raking leaves in his backyard: he has had a stroke. He is quickly taken to the hospital and receives appropriate care. Fortunately, Michael survives! His physician prescribes a few months of convalescence so that he can recover as much as possible before resuming his regular activities. Since Michael made the right decision to sign up for critical illness insurance when his advisor raised the issue with him, he contacts us after being discharged from the hospital to make a claim.

How we determine the amount to pay for this claim:

Life insurance amount selected at enrolment: $50,000

Loan balance at the time of the diagnosis: $39,000

Average daily balance over the 12 months prior to the critical illness diagnosis X 110%: $42,000

The amount we pay, applied to the personal line of credit, is therefore $39,000.

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IMPORTANT TO KNOW

Payment of the critical illness benefits terminates the critical illness and accidental dismemberment insurance for all insureds.

However, if the amount paid for critical illness does not pay back the entire amount insured with life insurance, the life insurance remains in effect for all insureds on the amount insured with life insurance at enrolment less the amount paid for critical illness and accidental dismemberment insurance.

This is how this is applied in Michael's situation:

Amount insured with life insurance at enrolment (authorized loan amount): $50,000

Amount we paid for the critical illness: $39,000

Amount insured with life insurance after the payment of the critical illness and accidental dismemberment insurance claim:

$50,000 - $39,000 = **$11,000**

If Michael dies while his life insurance is still in effect, we will calculate the amount to pay as follows:

Loan amount insured with life insurance (after the payment of critical illness insurance benefits)	$11,000
Loan balance at the time of death	$15,000
Average daily balance over the 12 months prior to the death X 110%:	$13,200
Amount we pay in life insurance	**$11,000**

If premium payments are overdue on the date the critical illness is diagnosed, they will be deducted from the amount we pay.

6. Accidental dismemberment insurance

6.1 What we mean by accidental dismemberment

Accidental dismemberment means to lose a limb or use of a limb, or to lose an eye or vision in one eye **further to an accident** (see the definition of “accident” on p. 5).

By “loss of a limb”, we mean:

- Total amputation at or above the wrist or loss of use of a hand or an arm
- Total amputation at or above the wrist or loss of use of a foot or leg
- Total and irrecoverable loss of sight in one eye

By “loss of the use of a limb”, we mean the total and irrecoverable loss of the limb in question, provided the loss continues for 12 consecutive months and is considered permanent.

The accident at the source of the dismemberment must occur while the insurance is in effect.

The loss or loss of use of a limb or an eye must be diagnosed by a specialist (see the definition of “specialist” on p. 6).

6.2 Amount we pay in case of accidental dismemberment

In case of accidental dismemberment, we pay the Bank an amount equal to the percentage of the insured loan balance calculated on the date of the accidental dismemberment diagnosis. The percentage is determined based on the loss suffered (see the table below).

The amount paid cannot exceed $150,000.

For critical illness and accidental dismemberment coverage, the insured balance is the loan balance used calculated on the date of the accidental dismemberment diagnosis.

It cannot be higher than the lesser of the following amounts:

- The life insurance amount selected at enrolment (the authorized amount or the insured's choice of amount); or
- The maximum amount set out for critical illness and accidental dismemberment insurance coverage ($150,000).

Insured percentage based on the loss suffered

Loss or loss of use	Percentage of insured balance
For each limb lost (including an eye)	25% (maximum 100%)
Both eyes	100 %
Hemiplegia, quadriplegia or paraplegia	100 %

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Max loses an arm further to a work accident. Since Max has critical illness and accidental dismemberment insurance, he contacts us to make a claim. We will pay the following amount:

Insured amount for critical illness and accidental dismemberment: $40,000

Loan balance at the time of the diagnosis: $22,000

Average daily balance over the past 12 months: $26,500

Insured amount for accidental dismemberment: $22,000 X 25% (loss of a limb) = $5,500

The amount we pay, applied to the line of credit balance, is therefore $5,500.

IMPORTANT TO KNOW

In certain situations, we can pay the accidental dismemberment benefits AND the disability benefits for the same event (e.g., if the accidental dismemberment leads to the disability).

If the amount paid for the accidental dismemberment does not pay back the entire amount insured with life insurance, the life insurance remains in effect for all insureds on the amount insured with life insurance less the amount paid for accidental dismemberment (see example in subsection 5.4).

The total amounts paid for dismemberments resulting from one or several accidents and for a critical illness cannot exceed the maximum amount payable of $150,000.

7. Disability insurance

7.1 What we mean by disability

"Being disabled" or "being on disability" means that you are unable to perform the usual duties of your job for medical reasons. If you are unemployed, you are disabled if your physical or psychological health prevents you from doing normal activities for someone your age.

The disability must:

- Be certified by a physician practicing in Canada or the United States;
- Result from an illness or an accident suffered while the insurance is in effect; and
- Require ongoing medical care deemed satisfactory by the insurer.

(See the definition of an accident and an illness on p.5.)

Conditions to be entitled to disability benefits:

- Your disability must continue for at least 60 consecutive days. We will not pay any benefits during this time, which is the waiting period.

Note: An attempted return to work of a day or less during this period does not lead to a new waiting period.

- During your disability, you cannot engage in any activity for which you receive financial compensation, regardless of how minute it may be. Otherwise, we will refuse your claim and terminate benefits.
- You will have to reimburse any surplus benefits paid to you if you return to work before the end of the period covered by the amount paid.

7.2 CAUTION - EXCLUSIONS specific to disability

In addition to the exclusions indicated in section 8, we do not pay any benefits for a disability that results directly or indirectly from the following conditions:

- **Alcoholism or drug addiction, unless these conditions are treated with a closed treatment program**
- **Exclusions specific to the insured (if applicable), if we accept to insure you despite your medical history, medical condition, or travel to certain countries, by adding an exclusion with a rider.**
- **Pregnancy: normal pregnancy**
- **Back problems: back pain (dorsalgia), neck pain, or lower back pain (lumbago), which is only evidenced by the pain you feel and for which no objective diagnosis is possible, other than a diagnosis of normal arthrosis due to your age**
- **Cosmetic care: Cosmetic treatment or surgery**

Consult section 8 to read about the other disability insurance exclusions.

7.3 Amount we pay in case of disability

In case of accidental disability, we pay the Bank an amount equivalent to the insured loan payment on the disability start date including the insurance premium.

In case of non-accidental disability, we pay the Bank an amount equal to the lesser amount between:

- The insured payment on the disability start date including the insurance premium, or
- 2% of the average daily balance of the loan over the 12 months preceding the disability start date multiplied by 110% (if the insurance has been in effect for less than 12 months: 2% of the average daily balance used since the insurance start date multiplied by 110% including the insurance premium).

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For disability coverage, “insured payment” means the payment amount indicated on your insurance application. It is the amount that you choose to cover in case of disability, i.e.,

> A chosen fixed amount, in multiples of $250; or

> 2% of the balance insured with life insurance at the start of the disability.

The chosen amount in multiples of $250 cannot be higher than 2% of your insured loan balance.

The insured payment cannot be higher than the stipulated maximum of $2,000 per month.

If a disability period is not as long as the period covered by a payment, we calculate the amount to be paid based on the number of days of disability.

Omar works in construction. He developed tendinitis in one of his shoulders and had to stop working for 3 months and 18 days. We calculated the amount to be paid for Omar's disability as follows, taking into account the 60-day waiting period.

Insured payment chosen by the client (in multiples of $250): $500

Maximum amount payable: $2,000 per month

Amount calculated based on the number of days of disability not part of a period covered by a payment (18 days):

($500/30) x 18 = $300

Total for 1 month and 18 days: $500 + $300 = $800

Amount we will pay for 1 month and 18 days of disability: $800

7.4 We maintain benefits if you refinance your loan during a disability

In the case of a refinancing (i.e., when you increase your loan amount) while you are on disability, we will pay the payment that was insured before the refinancing (without exceeding the maximum disability coverage amount stipulated in the new certificate). The benefits paid before the refinancing are calculated for the maximum benefit payment period related to the new insurance.

See subsection 7.5 for the maximum benefit payment period and section 11 for refinancing details.

7.5 We pay benefits during a limited period

For the full term of the loan and all insureds, we pay up to a maximum of 48 months of cumulative payments.

For a single disability, we pay up to a maximum of 24 months of consecutive payments.

IMPORTANT TO KNOW

Distinct disability periods must be separated by a return to work of **over 90 days**. Otherwise, it is considered the same disability period.

If you are unemployed, distinct disability periods must be separated by a return to normal activities for a person your age for over 90 days.

7.6 We cease paying disability insurance benefits in certain situations

Benefits cease when the earliest of the following events occurs:

Activities with financial compensation: When you engage in an activity for which you receive financial compensation, except if it is an attempted return to work of one day during the waiting period.

Maximum age: The last day of the month in which you turn 70.

Death: If you die or if we reimburse the insured loan balance due to the death of another insured.

End of disability: The date on which you are no longer disabled, based on the definition set out in this certificate.

Loan expiry: The date on which the loan is closed.

Critical illness or accidental dismemberment: We reimburse the amount insured with life insurance in full in case of a critical illness diagnosis or accidental dismemberment.

Maximum period: When we reimburse your insured loan payment for 24 months for a single disability, or 48 months for all insured for the entire term of the loan.

Medical evidence not provided: If you fail to present the supporting documents we request within a reasonable timeframe (maximum of 1 year starting when the disability starts or our last communication, as applicable), and whether this is during the disability or at the beginning, or that you refuse to undergo a medical examination or assessment by a rehabilitation consultant as we requested.

Return to work: The date on which you return to work part-time, full-time or gradually, or on temporary assignment, whether to carry out your normal duties for your job or any other job, including light work, unless it is an attempted return to work of one day during the waiting period.

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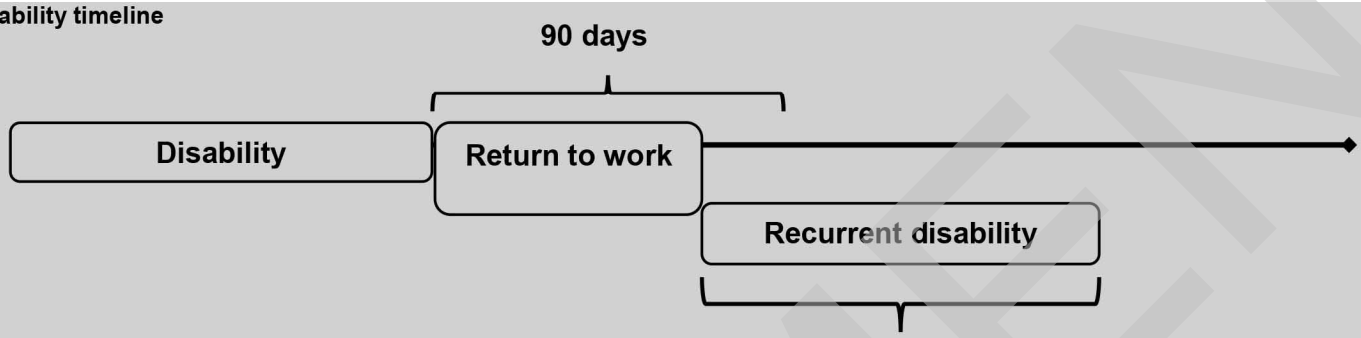
7.7 We can resume payment of disability insurance benefits if you once again become disabled (recurrent disability)

The following 3 conditions must be met for us to resume repaying your insured loan payment:

1. The recurrent disability must occur within 90 days of your return to work or of normal activities for a person your age;
2. The relapse of this recurrent disability must be due to the same cause; and
3. You must be on leave of absence for at least 7 consecutive days.

Furthermore, you must provide us with medical evidence (e.g., a form completed by your attending physician). Claim requests for recurrent disability are subject to the same process as new claims.

Recurrent disability timeline



If your recurrent disability meets all the criteria, we will start reimbursing your insured loan payment as we did before your return to work or to normal activities for a person your age.

Because it is the same disability, the duration of the recurrent disability is added to the previous disability to calculate the maximum period of 24 months and there is no waiting period.

You must present a new claim request if:

- Over 90 days have elapsed since your return to work or to normal activities for a person your age; or
- If your new disability occurs less than 90 days after your return to work and is attributable to another cause.

This new disability must continue for 60 days for us to pay benefits (waiting period).

7.8 We can terminate your disability coverage if you receive a permanent disability diagnosis

We will terminate your coverage after having paid the benefits to which you are entitled during the maximum period stipulated, when you become eligible for Quebec Pension Plan (QPP) benefits because of your permanent disability.

This avoids you having to pay premiums for coverage that no longer provides benefits. If this situation occurs, your life insurance and, if applicable, your critical illness and accidental dismemberment insurance, remain in effect.

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8. CAUTION - General EXCLUSIONS

Specific exclusions for each type of coverage are set out in subsections 4.2, 5.1.1, 5.2.1, 5.3.1 and 7.2.

The following exclusions concern life insurance, critical illness and accidental dismemberment insurance as well as disability insurance.

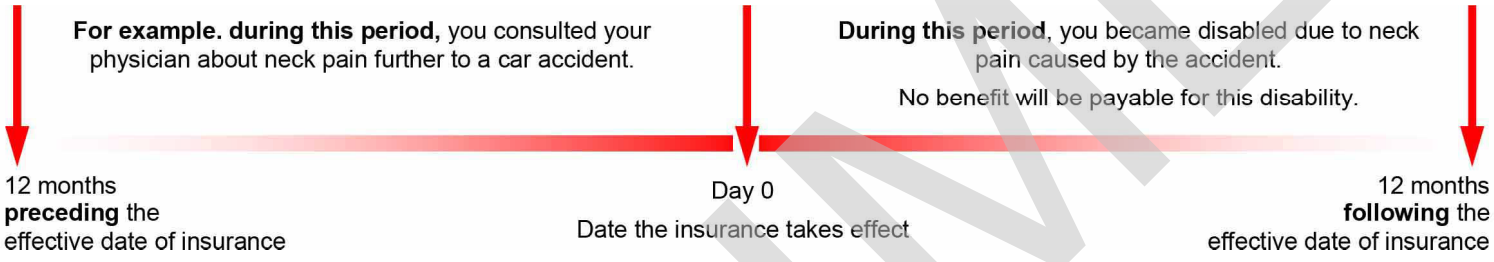
Pre-existing conditions

We do not pay any benefits if the death, critical illness, accidental dismemberment or disability occurs within 12 months of the insurance effective date, and that you have shown signs or experienced symptoms, contracted an illness, suffered an injury or from any other related cause, and that you have for this reason:

- **Consulted or received treatment from a physician or other professional who is a member of a health care association or organization, or were referred for consultation or treatment purposes;**
- **Were subject to an examination or referred for an examination;**
- **Took medication or had medication prescribed to you; or**
- **Were hospitalized;**

over the 12 months preceding the insurance effective date, whether there is a direct or indirect link between this pre-existing condition or illness and death, critical illness, accidental dismemberment or disability.

Example of pre-existing condition clause timeline



In addition, we do not pay any benefits when death, critical illness, accidental dismemberment or disability occurs under one of the following circumstances or if it is directly or indirectly related to one of the following circumstances:

- **Criminal offence: If you participate in a criminal offence or attempt to commit such an offence.**
- **Air travel: If you actively participate in a flight in any type of craft which can climb and fly such as, but not limited to: an airplane, helicopter, glider or hot air balloon, whether as pilot, crew member, instructor or student.**
- **Riot: If you actively participate in a civil uprising, riot or insurrection.**
- **War: During a war or any act of war, whether or not you participated in it, unless you were acting as a member of the Canadian Forces or Canadian Forces Reserve.**
- **Drugs: If you use narcotics or other medication, and exceed the dosage recommended by a physician or use drugs without a medical prescription.**
- **Attempted suicide or self-inflicted injury: If you attempt suicide or injure yourself deliberately, regardless of your mental state at the time.**
- **Terrorism: If you commit or attempt to commit an act of terrorism.**

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9. Duration of insurance

9.1 Start

The insurance will take effect on the later of the following dates:

- The date the insurance proposal was signed; or
- The date the loan was opened.

9.2 End

In addition to the situations terminating the insurance which are described in this certificate, the insurance is terminated by one of the following events:

- **Maximum age:** The last day of the month in which you turn 70.
- **Cancellation**: The date on which you request cancellation of your insurance by phone, or the date on which the cancellation request is received at our offices.
- **Assumption:** The date on which the loan (or part of the loan) is assumed by another obligor who is not insured by an insurance certificate for the loan.
- **Death**: If we reimburse the insured loan balance further to a life insurance claim.
- **Loan expiry:** The date the loan was closed.
- **Critical illness or accidental dismemberment**: If we pay insurance benefits for a critical illness or accidental dismemberment and these benefits reimburse the entire amount insured with life insurance.
- **Non-payment of premiums**: Insurance premium payments are overdue by more than 3 months.

IMPORTANT TO KNOW

Critical illness and accidental dismemberment insurance as well as disability insurance are automatically terminated when life insurance ends.

10. Cost of insurance and payment of premiums

10.1 The cost of your insurance depends on several factors.

Your premium rate is determined based on:

- Your age when signing the insurance application, then your age every year on the anniversary date of the start of the life insurance
- Your sex
- Your consumption of tobacco or nicotine-replacement products
- The amount used by your loan, without exceeding the authorized amount indicated in the insurance application

Different rates apply for each type of coverage. You will find a detailed rate table in subsection 10.3.

A 10% discount is applied on insurance premiums when there is more than one insured for life insurance, critical illness and accidental dismemberment coverage. Added to this is the insurance tax. You will find the tax rates on www.nbc.ca.

10.2 Your life insurance premiums are collected every month on the same date as interest is paid and in a distinct transaction.

Unless you indicate otherwise, your loan insurance premiums will be collected from the transactional account connected to the loan on the same day as the interest charges are collected, in a distinct transaction.

Your premiums could vary from one month to the next depending on factors such as the loan amount used and the number of days in the billing period.

10.3 Monthly premium rates for the personal line of credit

Note: We reserve the right to modify the premium pricing schedule at any time. The new schedule will then apply to all insureds.

The rates set out in this certificate are monthly rates.

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Age	Life (Rates per $1,000 of insured balance)							
	A - $0 to $50,000				B - $50,001 to $500,000			
	Male		Female		Male		Female	
	Non-smoker	Smoker	Non-smoker	Smoker	Non-smoker	Smoker	Non-smoker	Smoker
18	0.24	0.34	0.20	0.29	0.12	0.19	0.09	0.14
19	0.24	0.34	0.20	0.29	0.12	0.19	0.09	0.14
20	0.24	0.34	0.20	0.29	0.12	0.19	0.09	0.14
21	0.24	0.34	0.20	0.29	0.12	0.19	0.09	0.14
22	0.24	0.34	0.20	0.29	0.12	0.19	0.09	0.14
23	0.24	0.34	0.20	0.29	0.12	0.19	0.09	0.14
24	0.24	0.34	0.20	0.29	0.12	0.19	0.09	0.14
25	0.24	0.34	0.20	0.29	0.12	0.19	0.09	0.15
26	0.24	0.34	0.20	0.29	0.12	0.20	0.09	0.15
27	0.24	0.34	0.20	0.29	0.12	0.20	0.09	0.16
28	0.24	0.34	0.20	0.29	0.12	0.20	0.09	0.16
29	0.24	0.34	0.20	0.29	0.12	0.20	0.09	0.16
30	0.25	0.35	0.21	0.30	0.12	0.21	0.10	0.17
31	0.25	0.35	0.21	0.30	0.13	0.21	0.10	0.17
32	0.25	0.35	0.21	0.30	0.13	0.21	0.11	0.19
33	0.25	0.35	0.21	0.30	0.13	0.21	0.11	0.19
34	0.25	0.35	0.21	0.30	0.15	0.22	0.12	0.20
35	0.25	0.35	0.21	0.30	0.16	0.23	0.14	0.21
36	0.25	0.36	0.21	0.30	0.17	0.24	0.15	0.22
37	0.25	0.36	0.22	0.30	0.19	0.26	0.17	0.23
38	0.26	0.36	0.23	0.32	0.20	0.27	0.18	0.24
39	0.28	0.38	0.24	0.33	0.21	0.30	0.19	0.26
40	0.29	0.40	0.26	0.35	0.23	0.33	0.21	0.29
41	0.30	0.43	0.27	0.36	0.25	0.36	0.22	0.31
42	0.32	0.47	0.29	0.40	0.27	0.40	0.24	0.33
43	0.34	0.52	0.31	0.43	0.29	0.43	0.26	0.35
44	0.38	0.57	0.33	0.46	0.31	0.47	0.28	0.39
45	0.41	0.63	0.37	0.50	0.35	0.52	0.30	0.42
46	0.46	0.69	0.40	0.54	0.38	0.58	0.34	0.46
47	0.49	0.76	0.44	0.59	0.41	0.63	0.36	0.49
48	0.54	0.84	0.47	0.64	0.45	0.70	0.39	0.54
49	0.56	0.90	0.49	0.68	0.47	0.75	0.41	0.56
50	0.58	0.96	0.51	0.72	0.48	0.79	0.43	0.59
51	0.61	1.02	0.53	0.75	0.51	0.85	0.44	0.62
52	0.65	1.10	0.56	0.80	0.54	0.92	0.46	0.66
53	0.68	1.18	0.59	0.84	0.57	0.98	0.49	0.70
54	0.72	1.25	0.62	0.89	0.59	1.05	0.51	0.74
55	0.76	1.35	0.64	0.94	0.63	1.12	0.53	0.78
56	0.80	1.43	0.67	0.99	0.66	1.19	0.56	0.82
57	0.84	1.53	0.70	1.04	0.70	1.28	0.59	0.87
58	0.90	1.63	0.73	1.11	0.74	1.36	0.61	0.92
59	0.94	1.73	0.79	1.17	0.79	1.43	0.65	0.98
60	1.01	1.81	0.84	1.24	0.84	1.51	0.70	1.03
61	1.06	1.92	0.90	1.32	0.88	1.60	0.75	1.10
62	1.12	2.03	0.95	1.39	0.94	1.68	0.79	1.16
63	1.19	2.14	1.02	1.48	1.00	1.78	0.85	1.23
64	1.26	2.26	1.09	1.57	1.05	1.88	0.91	1.31
65*	1.34	2.39	1.16	1.68	1.13	1.99	0.96	1.40
66*	1.42	2.52	1.23	1.79	1.18	2.10	1.03	1.49
67*	1.51	2.65	1.32	1.91	1.26	2.22	1.10	1.59
68*	1.60	2.80	1.41	2.04	1.33	2.34	1.18	1.69
69*	1.69	2.97	1.50	2.14	1.42	2.48	1.25	1.78
70*	1.79	3.13	1.60	2.25	1.50	2.61	1.34	1.87

* Rates apply to renewal only.

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Age	Critical illness and accidental dismemberment (Rates per $1,000 of insured balance)								Disability
	A - $0 to $50,000				B - $50,001 to $150,000				
	Male		Female		Male		Female		Monthly rate by payment of $10
	Non-smoker	Smoker	Non-smoker	Smoker	Non-smoker	Smoker	Non-smoker	Smoker	
18	0.22	0.26	0.22	0.26	0.11	0.13	0.11	0.13	0.17
19	0.22	0.26	0.22	0.26	0.11	0.13	0.11	0.13	0.17
20	0.22	0.26	0.22	0.26	0.11	0.13	0.11	0.13	0.17
21	0.22	0.26	0.22	0.26	0.11	0.13	0.11	0.13	0.17
22	0.22	0.26	0.22	0.26	0.11	0.13	0.11	0.13	0.17
23	0.22	0.26	0.22	0.26	0.11	0.14	0.11	0.14	0.17
24	0.22	0.26	0.22	0.26	0.11	0.14	0.11	0.14	0.17
25	0.22	0.26	0.22	0.26	0.12	0.14	0.12	0.15	0.17
26	0.22	0.26	0.22	0.26	0.12	0.14	0.12	0.15	0.17
27	0.22	0.26	0.22	0.26	0.12	0.15	0.12	0.16	0.17
28	0.22	0.26	0.22	0.26	0.12	0.15	0.12	0.16	0.18
29	0.22	0.27	0.22	0.29	0.13	0.17	0.13	0.18	0.19
30	0.24	0.30	0.24	0.32	0.14	0.19	0.14	0.21	0.21
31	0.25	0.32	0.25	0.35	0.16	0.21	0.16	0.23	0.21
32	0.26	0.34	0.26	0.37	0.18	0.23	0.18	0.25	0.22
33	0.27	0.36	0.27	0.39	0.19	0.25	0.19	0.27	0.23
34	0.28	0.40	0.28	0.43	0.20	0.28	0.20	0.30	0.24
35	0.29	0.43	0.29	0.46	0.21	0.31	0.21	0.33	0.25
36	0.30	0.46	0.30	0.49	0.23	0.35	0.23	0.37	0.26
37	0.32	0.49	0.32	0.53	0.24	0.38	0.24	0.40	0.27
38	0.33	0.53	0.33	0.55	0.25	0.41	0.25	0.43	0.28
39	0.33	0.57	0.33	0.58	0.26	0.46	0.26	0.47	0.31
40	0.34	0.61	0.34	0.61	0.29	0.51	0.28	0.51	0.32
41	0.36	0.67	0.35	0.65	0.30	0.55	0.30	0.54	0.35
42	0.39	0.73	0.37	0.71	0.32	0.61	0.31	0.59	0.36
43	0.40	0.78	0.39	0.75	0.33	0.65	0.32	0.62	0.39
44	0.45	0.88	0.43	0.82	0.38	0.74	0.36	0.68	0.40
45	0.50	0.98	0.46	0.90	0.41	0.82	0.39	0.75	0.42
46	0.54	1.10	0.51	0.97	0.46	0.91	0.42	0.80	0.43
47	0.59	1.20	0.54	1.05	0.49	0.99	0.46	0.87	0.46
48	0.64	1.30	0.59	1.11	0.54	1.08	0.49	0.93	0.47
49	0.72	1.46	0.66	1.22	0.60	1.22	0.55	1.02	0.49
50	0.79	1.62	0.73	1.32	0.66	1.34	0.61	1.10	0.52
51	0.88	1.79	0.79	1.43	0.73	1.49	0.65	1.20	0.56
52	0.96	1.95	0.86	1.55	0.80	1.62	0.72	1.29	0.59
53	1.04	2.12	0.94	1.67	0.87	1.77	0.78	1.39	0.62
54	1.13	2.33	1.00	1.78	0.95	1.94	0.83	1.48	0.67
55	1.22	2.52	1.06	1.87	1.01	2.10	0.89	1.56	0.71
56	1.31	2.71	1.13	1.98	1.09	2.26	0.94	1.66	0.77
57	1.39	2.93	1.19	2.09	1.16	2.43	0.99	1.74	0.81
58	1.49	3.13	1.26	2.21	1.24	2.61	1.05	1.84	0.87
59	1.57	3.31	1.32	2.30	1.31	2.76	1.09	1.92	0.94
60	1.66	3.49	1.38	2.39	1.38	2.92	1.15	1.99	1.00
61	1.75	3.68	1.44	2.48	1.46	3.06	1.20	2.07	1.06
62	1.84	3.87	1.50	2.57	1.54	3.22	1.26	2.15	1.12
63	1.93	4.06	1.56	2.67	1.61	3.38	1.30	2.23	1.21
64	2.02	4.23	1.62	2.77	1.69	3.52	1.35	2.31	1.28
65*	2.11	4.40	1.68	2.86	1.76	3.66	1.40	2.39	1.34
66*	2.21	4.56	1.74	2.96	1.84	3.81	1.45	2.47	1.41
67*	2.30	4.74	1.80	3.06	1.92	3.95	1.50	2.55	1.49
68*	2.39	4.92	1.86	3.16	2.00	4.10	1.55	2.64	1.56
69*	2.49	5.10	1.92	3.26	2.08	4.24	1.60	2.72	1.64
70*	2.59	5.28	1.98	3.37	2.16	4.39	1.65	2.81	1.70

* Rates apply to renewal only.

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10.3.1 Sample premium calculation

Anne is 28 years old and wants to buy furniture for her first apartment.

She takes out a $18,000 personal line of credit and signs up for life insurance and disability insurance coverage. She is a non-smoker.

The monthly payment will be $250. Her apartment is in Quebec where tax on insurance is 9%.

Here's how her insurance premiums will be calculated.

Life insurance

(Amount/1,000) X Premium rate X Tax

($18,000/1,000) X $0.22 X 9% = **$4.32**

Disability insurance

(Payment/10) X Premium rate X Tax

($250/10) X $0.18 X 9% = **$4.91**

Anne's total insurance premium will be $9.23 per month.

10.4 We reimburse the premiums collected in certain situations

In addition to the specific situations set out in this certificate, we will reimburse any excess premiums collected.

You can request your premiums be reimbursed by phone or in writing. We will analyze your request and if we have indeed collected excess premiums, we will reimburse you for these premiums.

11. You must sign a new insurance application for a refinancing

Refinancing a loan means increasing the amount.

When you refinance your loan, you must sign a new insurance application to enable us to assess if we are still able to insure you for this new amount. The insurance for your current loan is then terminated, and the conditions of the new application apply:

- Premiums are calculated based on your age and the new loan amount;
- Restrictions and exclusions that involve a duration (e.g., suicide and pre-existing conditions) are reset to zero.

11.1 During a refinancing, we may recognize your previous insurance if you are not insurable or not eligible

If you are over 64 at the time of the refinancing, you are not eligible for insurance. If you are 64 or younger, you are eligible. However, a change in your health may prevent us from insuring you again.

Fortunately, there is a solution!

If the new application is declined because of your health, or if you are not eligible because of your age, we will insure you with the conditions of the new application (age, premium rate, exclusions, etc.) for the insured loan amount **before the refinancing**. We call this: recognition of previous insurance.

There are no steps to take. When we receive your new insurance application, we will review it and notify you in writing if we are able to recognize your previous insurance.

11.1.1 Recognized insurance amount

For life insurance as well as critical illness and accidental dismemberment insurance, the recognized insurance amount is the loan amount insured with life insurance before the refinancing.

For disability insurance, the insured payment is the insured loan payment before the refinancing.

The recognized insurance amount cannot be higher than the maximum amount set out for each type of coverage.

Ronaldo and Anastasia are refinancing their loan to renovate their kitchen and bathroom.

When we receive Ronaldo's insurance application, we notice that his health status has changed since his previous application and we therefore cannot grant him insurance on his new loan.

However, we can recognize the insurance on the previous loan.

Loan details before and after the refinancing:

	Before the refinancing	After the refinancing
Authorized loan amount	$35,000	$50,000
Amount insured with life insurance	$35,000	$35,000

Ronaldo is therefore insured for a maximum of $35,000 in case of death.

Recognition of previous insurance remains conditional on the accuracy of the information you provided when you submitted the first insurance application (on the previous loan). If certain details lead us to believe that the first insurance was granted with incorrect information, we could retroactively cancel the insurance and, if applicable, refuse a claim.

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IMPORTANT TO KNOW

If you refinance a loan from another institution with the Bank, you must meet our eligibility and insurability criteria, and complete an insurance application. In case of refusal, we do not recognize the insurance held with another institution or another insurer.

12. You have the right to terminate your loan insurance at any time

12.1 You can call or write to us

To terminate your insurance:

- Call our customer service at 1-877-871-7500; or
- Write to us at:
  National Bank Life Insurance
  800 Saint-Jacques Street, office 16701,
  Montreal, Quebec H3C 1A3

12.2 We will reimburse the premiums paid if you cancel your insurance within 30 days of enrolment

If you cancel your insurance within 30 days of signing the insurance application, we will reimburse you the premiums collected, as applicable. The insurance will be cancelled and deemed never having been in effect.

12.3 We will not reimburse any premiums if you terminate your insurance more than 30 days after enrolment

Your insurance will be cancelled on the later of the following dates:

- The date on which you indicate to us your intention to terminate the insurance
- The date on which we receive your written request
- The date on which you ask to have the insurance terminated, if you request it in advance

We will not reimburse any premiums if you terminate your insurance, except for the reasons set out in this certificate.

13. How do I make a claim and what happens then?

13.1 Timeframe to make a claim

You must notify us quickly if you receive a diagnosis of critical illness or accidental dismemberment, or if you are in a disabled state for a period of more than 60 days. If you die, your estate will need to contact us.

We will send you forms to complete to make your claim. You must return them to us along with the required supporting documents, if applicable, within the following timeframes:

Timeframes to present claim documents and supporting documents

Critical illness, accidental dismemberment, disability	1 year from the diagnosis of critical illness, or accidental dismemberment, or the start of the disability. If you exceed this timeframe, you will no longer be entitled to receive benefits.
Life insurance	As soon as it is reasonably possible to do so.

To find out about the procedure, call our customer service at 1-877-871-7500. You can also consult our website at http://www.nbc-insurance.ca/claims.html.

13.2 We process and pay the benefits to National Bank within 30 days

We will process your request within 30 days of receiving the completed form and required supporting documents.

If all the certificate conditions are met and we accept your claim, we will pay the benefits to the Bank within the same timeframe of 30 days.

13.3 We pay one set of benefits at a time

- For life insurance and critical illness insurance, we pay the amount once for the entire term of the loan.
- If 2 insureds are on disability at the same time, we will first pay the benefits for the disability leave expected to be the longest. If the first disability ends and the second insured is also entitled to benefits, we will continue the payment of the insured loan installments.
- If an accidental dismemberment occurs simultaneously for more than one insured without it being possible to determine which of the insured suffered the loss first, we will first pay the higher amount. If there is still an insured amount to reimburse on the loan, we will pay the following amounts, if applicable, until the amount insured with life insurance is refunded in full or the maximum insurable amount of $150,000 has been reached.

13.4 We adjust the premium rate in cases of incorrect declaration of age or sex

If your age or sex has been incorrectly declared, we will adjust premiums based on the set rate for your age or sex when the insurance application was signed. If excess funds have been collected, we will reimburse you; if it is a shortfall, the amount will be deducted from the amount to be paid for your claim.

If your actual age exceeds the age at which your insurance ends, we will not pay any benefits and we will reimburse you all the excess premiums you paid after having turned the maximum age.

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13.5 What you can do if you disagree with our decision about a claim

To contest a decision that we made as part of your claim request, you must contact us. You can also send us any document that could justify any review of our decision.

If we have not responded to your complaint, or if you are still not satisfied and want to continue with the process, you may at your discretion and at the same time:

> Request a review of your file; or
> Consult your legal advisor; or
> Contact one of the following organizations:

Residents of the province of Quebec

Contact the Autorité des marchés financiers (AMF).

The contact information for the AMF can be found in

the Autorité des marchés financiers contact information section.

Residents of other provinces

Contact:

OmbudService for Life & Health Insurance (OLHI)
Toll-free: 1-888-295-8112
(Across Canada) or 416-777-9002 (in Toronto)
Website: olhi.ca

14. Additional information

14.1 You or the Bank can obtain a copy of the documents that make up your insurance file

Upon request, you or the Bank can obtain a copy of the policy, certificate, insurance proposal as well as any statement or document sent as evidence of insurability. Contact our customer service; one of our representatives will be happy to help you.

14.2 No dividends from surplus or profits

This insurance does not entitle you to receive any dividends from the surplus or profits we may declare.

14.3 Designation of beneficiary

This insurance certificate includes provisions revoking or restricting the right of the person covered by life insurance to designate beneficiaries to whom or for whose benefit insurance money is to be payable.

14.4 Limitation of actions -- Specifics based on your province of residence

Residents of Alberta, British Columbia and Manitoba

Every action or proceeding against the insurer for the recovery of insurance money payable under the agreement is absolutely barred unless commenced within the timeframe set out in the Insurance Act.

Residents of Ontario

Every action or proceeding against an insurer for the recovery of insurance amounts payable under the agreement must be commenced within the timeframe set out in the Limitations Act, 2002 and its amendments.

Residents of New Brunswick

No action or procedure for recovery of a claim under the terms of this agreement can be brought against the insurer more than one year after the date on which the insured amounts became payable or would have become payable if the claim had been valid.

Residents of the province of Quebec

Every action or proceeding against the insurer for the recovery of insurance amounts payable under the terms of the agreement must be commenced within 3 years.

Residents of other provinces

For applicable limitation periods, consult your provincial regulatory body or your legal advisor.

14.5 Notice concerning the MIB, LLC

Your insurability information will be treated in a confidential manner.

However, the insurer or its reinsurer may make a brief report thereon to MIB, LLC a non-profit membership corporation of life insurance companies, which operates an information exchange on behalf of its members.

Upon request by a member insurance company to which you have applied for life or critical illness insurance coverage, or to which a claim is submitted, the MIB, LLC will supply such company with the information on its file. Upon receipt of a request from you, the MIB, LLC will arrange disclosure of any information it may have on file.

If the information in the MIB, LLC's files seems incorrect, you can ask for it to be corrected by writing to them at MIB, LLC, 50 Braintree Hill Park, Suite 400, Braintree, MA 02184-8734, United States. Phone: 1-866-692-6901.

The insurer may also disclose information from its files to other life insurance companies to which you may apply for life or health insurance or to which a claim for benefits may have been submitted.

For more information on the MIB, LLC consult the mib.com website.

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14.6 Collection, use and disclosure of your personal information

The insurer collects, uses and discloses your personal information to:

- Confirm your identity
- Provide the loan insurance requested
- Prevent fraud, manage risk and comply with laws
- Help the insurer improve and develop its products and services and better understand its clients
- Enable the insurer, National Bank of Canada or its subsidiaries, to present offers and other promotional material from business partners, unless you choose not to receive them
- Any other purpose set out in the Privacy Policy of National Bank and its subsidiaries available at https://www.nbc.ca/privacy-policy.html. The policy mentions, among others, which information the Insurer collects, to whom it is communicated, and how it is used and stored, what your options and rights are, and how to manage your consent.

In order to verify your insurability for loan insurance, the Insurer may also collect information from any doctor, hospital, clinic, paramedical firm, service provider, agent, insurance company, or any other organization that holds information on you or your health status, including MIB, LLC, an organization that maintains a database of applicant information that insurers may consult as part of their underwriting insurance or a claim (see Notice concerning MIB, LLC).

In addition, the Insurer may also disclose any information about your health or other relevant information about you to MIB, LLC or its reinsurers.

Your personal information will be kept by the Insurer and its subsidiaries for a reasonable period of time following the end of the business relationship to comply with their legal obligations.

National Bank Life Insurance has implemented a series of measures to preserve the confidentiality of personal information.

We have put together an insurance file containing any personal information obtained in connection with your insurance application as well as information about any insurance claim under this insurance. Only employees or agents responsible for underwriting, administration, investigations and claims or the reinsurer, where applicable, have access to this file. All files are kept at our offices.

All persons authorized to do so (such as yourself or any person you authorize) may consult the personal information contained in the file and, if need be, request corrections by writing to:

National Bank Life Insurance Company, Access to Personal Information Officer
800 Saint-Jacques Street, office 16701, Montreal, Quebec H3C 1A3.

For more information, consult our privacy policy nbc-insurance.ca/confidentiality.html.

15. Complaint handling

The client experience is our top priority.

No matter what you have to say, we're here to listen and provide assistance.

If the service you received didn't live up to your expectations, go to our website at www.nbc-insurance.ca/your-opinion.html to find out about our complaint handling process, or contact our customer service.

For more information, call us:
Montreal: 514-871-7500
Toll-free: 1-877-871-7500

16. Autorité des marchés financiers contact information (province of Quebec only)

For any additional information about the obligations of the insurer and distributor toward you, contact the Autorité des marchés financiers (AMF):

Autorité des marchés financiers
Place de la Cité, Cominar Tower
2640 Laurier Blvd., 4th floor
Quebec City, Quebec G1V 5C1
Quebec City: 418-525-0337
Montreal: 514-395-0337
Elsewhere in the province of Quebec: 1-877-525-0337
Fax: 1-877-285-4378
www.lautorite.qc.ca

No one may amend this certificate of insurance. All amended forms will be considered null and void. National Bank of Canada employees may at no time act as authorized agents of National Bank Life Insurance for the administration of these group insurance policies.

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