Worksheet

Family Assignment

Timeline of completion: Must be 4 weeks prior to Occupancy or Post Occupancy

Suite: 1206 **Tower:** PSV **Date:** _____ **Completed by:** _____

Please mark if completed:

- Assignment Agreement Signed by both Assignor and Assignee
- Certified Deposit Cheque for Top up Deposit to 20% Not Required
- Certified Deposit Cheque for Family Assignment administration fee of $500 +HST payable to Amacon City Centre Seven New Development Partnership. Courier to Dragana at Amacon Head office (Toronto).
- Agreement must be in good standing. Funds in Trust: $_____.
- Assignors Solicitors information
- Assignees Solicitors information
- Verify if PDI has been completed. If not, Please identify who will be performing the PDI. If the Assignee is performing the PDI a Designate form must be signed by the Assignor to appoint the assignee to complete the PDI. This form must be submitted to customercareto@amacon.com
- Include Fintrac for Assignee
- Copy of Assignees ID
- Copy of Assignees Mortgage Approval

The Assignee can close at occupancy closing as long as all of the Above items have been completed and submitted

Note:

Once all of the above is completed, email the full package immediately to Stephanie for execution of the Assignment agreement. Stephanie will execute and the Amacon admin team will forward immediately to Blaney via email. The Parkside Admin team must courier the full hardcopy package to Blaney McMurtry's office. Please remember that the Assignment fee cheque should be couriered to Amacon.

Administration Notes:

_____

_____

_____

_____

_____

_____

20%

PSV

POSH STYLE VIBE

SUITE 1206 UNIT 6 LEVEL 12

ASSIGNMENT OF AGREEMENT OF PURCHASE AND SALE

THIS ASSIGNMENT made this 5th day of December 2017.

A M O N G:

Cui Xing Zhou

(hereinafter called the "**Assignor**")

OF THE FIRST PART;

- and -

Jia Bin Liu

(hereinafter called the "**Assignee**")

OF THE SECOND PART;

- and -

AMACON DEVELOPMENTS (CITY CENTRE) INC.

(hereinafter called the "**Vendor**")

OF THE THIRD PART.

WHEREAS:

(A) By Agreement of Purchase and Sale dated the 26th day of February 2012 and accepted the 26th day of February 2012 between the Assignor as Purchaser and the Vendor as may have been amended (the "**Agreement**"), the Vendor agreed to sell and the Assignor agreed to purchase Unit 6, Level 12, Suite 1206, together with 1 Parking Unit(s) and 1 Storage Unit(s) in the proposed condominium known municipally as 4011 Bricksone Mews, Mississauga, Ontario (the "**Property**");

(B) The Assignor has agreed to assign the Agreement and all deposits tendered by the Purchaser thereunder as well as any monies paid for extras or upgrades, monies paid as credits to the Vendor (or its solicitors) in connection with the purchase of the Property to the Assignee and any interest applicable thereto (the "**Existing Deposits**"), and the Assignee has agreed to assume all of the obligations of the Assignor under the Agreement and to complete the transaction contemplated by the Agreement in accordance with the terms thereof; and

(C) The Vendor has agreed to consent to the assignment of the Agreement by the Assignor to the Assignee.

NOW THEREFORE THIS AGREEMENT WITNESSETH THAT in consideration of the sum of Ten Dollars ($10.00) now paid by the Assignee to the Assignor and for such other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereby agree as follows:

1. Subject to paragraph 7 herein, the Assignor hereby grants and assigns unto the Assignee, all of the Assignor's right, title and interest in, under and to the Agreement including, without limitation, all of the Assignor's rights to the Existing Deposits under the Agreement;

2. The Assignor acknowledges that any amounts paid by the Assignor for Existing Deposits will not be returned to the Assignor in the event of any default or termination of the Agreement and the Assignor expressly acknowledges, agrees and directs that such amounts shall be held by the Vendor as a credit toward the Purchase Price of the Unit.

3. The Assignee covenants and agrees with the Assignor and the Vendor that he/she will observe and perform all of the covenants and obligations of the Purchaser under the Agreement and assume all of the obligations and responsibilities of the Assignor pursuant to the Agreement to the same extent as if he/she had originally signed the Agreement as named Purchaser thereunder. The Assignee acknowledges that in the event the Vendor does not receive the full benefit of the HST Rebate, (as defined in the Agreement) for any reason whatsoever, the Assignee shall be required to pay the amount of the HST Rebate to the Vendor on Closing in addition to the Purchase Price, as more particularly set out in the Agreement.

4. Subject to the terms of the Assignment Amendment, the Assignee covenants and agrees with the Assignor and the Vendor not to list or advertise for sale or lease and/or sell or lease the Unit and is strictly prohibited from further assigning the Assignee's interest under the Agreement or this Assignment to any subsequent party without the prior written consent of the Vendor, which consent may be arbitrarily withheld.

5. In the event that the Agreement is not completed by the Vendor for any reason whatsoever, or if the Vendor is required pursuant to the terms of the Agreement to refund all or any part of the Existing Deposits or the deposit contemplated by section 2 above, the same shall be paid to the Assignee, and the Assignor shall have no claim whatsoever against the Vendor with respect to same.

6. The Assignor hereby represents to the Assignee and the Vendor that he/she has full right, power and authority to assign the Agreement to the Assignee.

7. The Assignor covenants and agrees with the Vendor that notwithstanding the within assignment, he/she will remain liable for the performance of all of the obligations of the Purchaser under the Agreement, jointly and severally with the Assignee. For greater clarity, the Assignor may be required to complete the Occupancy Closing with the Vendor.

8. The Vendor hereby consents to the assignment of the Agreement by the Assignor to the Assignee. This consent shall apply to the within assignment only, is personal to the Assignor, and the consent of the Vendor shall be required for any other or subsequent assignment in accordance with the provisions of this Agreement.

9. The Assignee hereby covenants, acknowledges and confirms that he/she has received a fully executed copy of the Agreement and the Disclosure Statement with all accompanying documentation and material, including any amendments thereto.

10. The Assignor shall pay by certified cheque drawn on solicitor's trust account to Blaney McMurtry, LLP upon execution of this Assignment Agreement, Vendor's solicitor's fees in the amount of Five Hundred Dollars ($500.00) plus HST.

11. The Assignor and Assignee agree to provide and/or execute such further and other documentation as may be required by the Vendor in connection with this assignment, including, but not limited to, satisfaction of Vendor's requirements to evidence the Assignee's financial ability to complete the transaction contemplated by the Agreement, Assignee's full contact information and Assignee's solicitor's contact information.

12. Details of the identity of the Assignee and the solicitors for the Assignee are set forth in Schedule "A" and in the Vendor's form of Information sheet. Notice to the Assignee or to the Assignee's solicitor, shall be deemed to also be notice to the Assignor and the Assignor's solicitors.

13. Any capitalized terms hereunder shall have the same meaning attributed to them in the Agreement, unless they are defined in this Assignment Agreement.

14. This Assignment shall enure to the benefit of and be binding upon the parties hereto and their respective heirs, administrators, executors, estate trustees, successors and permitted assigns, as the case may be. If more than one Assignee is named in this Assignment Agreement, the obligations of the Assignee shall be joint and several.

15. This Assignment Agreement shall be governed by and construed in accordance with the laws of the Province of Ontario and the laws of Canada applicable therein.

IN WITNESS WHEREOF the parties have executed this Assignment Agreement.

DATED this **5th** day of **December** 2017.

Witness	Cui Xing Zhou **Cui Xing Zhou (Assignor)**
Witness	**(Assignor)**
Witness	**Jia Bin Liu (Assignee)**
Witness	**(Assignee)**

AMACON DEVELOPMENT (CITY CENTRE) INC.

Per:
Name:
Title: **Authorized Signing Officer**

I have authority to bind the Corporation

Schedule "A'

Details of Assignee

ASSIGNEE

NAME: Jun Bin Liu

DATE OF BIRTH: 1990/01/27 (YYYYMMDD) SIN #

ADDRESS: 46 Clairtrell Rd. North York, ON M2N 3J6

PHONE: Tel: 416 917 9158
Cell:
Facsimile:

E-mail: benliu443@gmail.com

ASSIGNEE

NAME:

DATE OF BIRTH: (YYYYMMDD) SIN #

ADDRESS:

PHONE: Tel:
Cell:
Facsimile:

E-mail:

ASSIGNEE'S SOLICITOR:

NAME: Yi Zhou Law Firm
Scarborough office

ADDRESS: 209 - 100 Lowdray Court
Toronto ON M1S 5C8

PHONE: Bus: 416 916 2668
Facsimile:

E-mail:

Assignor has same lawyer

PSV - Block 7 - PSV

AMENDMENT TO AGREEMENT OF PURCHASE AND SALE

Between: **AMACON DEVELOPMENT (CITY CENTRE) CORP.** (the **"Vendor"**) and

CUI XING ZHOU (the **"Purchaser"**)

Suite **1206** Tower **ONE** Unit **6** Level **12** (the **"Unit"**)

It is hereby understood and agreed between the Vendor and the Purchaser that the following change(s) shall be made to the above-mentioned Agreement of Purchase and Sale, and except for such change(s) noted below, all other terms and conditions of the Agreement shall remain as stated therein, and time shall continue to be of the essence.

DELETE: FROM THE AGREEMENT OF PURCHASE AND SALE
N/A

INSERT: TO THE AGREEMENT OF PURCHASE AND SALE
Notwithstanding any notice to the contrary which may have been received from the Vendor or its solicitors prior to the date hereof, the parties expressly agree that the final closing date shall be January 8th, 2018.

All other terms and conditions to remain the same and time to continue to be of the essence.

Dated at **Mississauga, Ontario** this 1st day of December **2017.**

SIGNED, SEALED AND DELIVERED
In the Presence of:

Witness

Cui Xing Zhou
Purchaser - CUI XING ZHOU

Accepted at Toronto this 7 day of December **2017.**

AMACON DEVELOPMENT (CITY CENTRE) CORP.

Per: _____ c/s
Authorized Signing Officer
I have the authority to bind the Corporation.

Individual Identification Information Record

NOTE: An Individual Identification Information Record is required by the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act*. This Record must be completed by the REALTOR® member whenever they act in respect to the purchase or sale of real estate.

It is recommended that the Individual Identification Information Record be completed:

(i) for a buyer when the offer is submitted and/or a deposit made, and

(ii) for a seller when the seller accepts the offer

Transaction Property Address: 4206 - 4011 Brickstone Mews Mississauga ON

Sales Representative/Broker Name: Re/Max Realty

Date Information Verified/Credit File Consulted: Dec 15th 2017

A. Verification of Individual

NOTE: One of Section A.1, A.2, or A.3 must be completed for your individual clients or unrepresented individuals that are not clients, but are parties to the transaction (e.g. unrepresented buyer or seller) . Where you are unable to identify an unrepresented individual, complete section A.4 and consider sending a Suspicious Transaction Report to FINTRAC if there are reasonable grounds to suspect that the transaction involves the proceeds of crime or terrorist activity. Where you are using an agent or mandatary to verify the identity of an individual, see procedure described in CREA's materials on REALTOR Link®.

1. Full legal name of Individual: John Doe

2. Address: 146 Glenforest Rd North York ON M4N 3S6

3. Date of Birth: 1990/12/27

4. Nature of Principal Business or Occupation: Mobile Solutions

A.1 Federal/Provincial/Territorial Government-Issued Photo ID

Ascertain the individual's identity by comparing the individual to their photo ID. The individual must be physically present.

1. Type of Identification Document*: Ontario Licence (must be original and have a photo. See CREA's FINTRAC materials on REALTOR Link® for examples)

2. Document Identifier Number: D7777-40119-01027

3. Issuing Jurisdiction: ONTARIO (Province, Territory, Foreign Jurisdiction or 'Canada') **Country:**

4. Document Expiry Date: 2019/12/27 (must be valid and not expired)

A.2 Credit File

Ascertain the individual's identity by comparing the individual's name, date of birth and address information above to information in a Canadian credit file that has been in existence for at least three years. If any of the information does not match, you will need to use another method to ascertain client identity. Consult the credit file at the time you ascertain the individual's identity. The individual does not need to be physically present.

1. Name of Canadian Credit Bureau Holding the Credit File:

2. Reference Number of Credit File:

A.3 Dual ID Process Method

1. Complete two of the following three checkboxes by ascertaining the individual's identity by referring to information in two independent, reliable, sources. Each source must be well known and reputable (e.g., federal, provincial, territorial and municipal levels of government, crown corporations, financial entities or utility providers). Any document must be an original paper or original electronic document (e.g., the individual can email you electronic documents downloaded from a website). Documents cannot be photocopied, faxed or digitally scanned. The individual does not need to be physically present

☐ Verify the individual's name and date of birth by referring to a document or source containing the individual's name and date of birth*

- ○ **Name of Source:**
- ○ **Account Number**:** (must be valid and not expired; must be record and expiry date)

☐ Verify the individual's name and address by referring to a document or source containing the individual's name and address*

- ○ **Name of Source:**
- ○ **Account Number**:** (must be valid and not expired; must be record and expiry date)

☐ Verify the individuals' name and confirm a financial account*

- ○ **Name of Source:**
- ○ **Financial Account Type:**
- ○ **Account Number**:**

*See CREA's FINTRAC materials on REALTOR Link® for examples. ** Or reference number if there is no account number

Individual Identification Information Record

A.4 Unrepresented Individual Reasonable Measures Record *(if applicable)*

Only complete this section when you are unable to ascertain the identity of an unrepresented individual.

1. **Measures taken to Ascertain Identity** *(check one)*:

☐ Asked unrepresented individual for information to ascertain their identity
☐ Other, explain: .....

Date on which above measures taken: .....

2. **Reason why measures were taken** *(check one)*:

☐ Asked unrepresented individual for information to ascertain their identity
☐ Other, explain: .....

B. Verification of Third Parties

NOTE: *Only complete Section B for your clients.* Complete this section of the form to indicate whether a client is acting on behalf of a third party. Either B.1 or B.2 must be completed.

B.1 Third Party Reasonable Measures

Where you cannot determine whether there is a third party, complete this section.

Is the transaction being conducted on behalf of a third party according to the client? *(check one)*:

☐ Yes
☑ No

Measures taken *(check one)*:

☐ Asked if client was acting on behalf of a third party
☐ Other, explain: .....

Date on which above measures taken: .....

Reason why measures were unsuccessful *(check one)*:

☐ Client did not provide information
☐ Other, explain: .....

Indicate whether there are any other grounds to suspect a third party *(check one)*:

☐ No
☐ Yes, explain: .....

B.2 Third Party Record

Where there is a third party, complete this section.

1. **Name of third party:** .....
2. **Address:** .....
3. **Date of Birth:** .....
4. **Nature of Principal Business or Occupation:** .....
5. **Incorporation number and place of issue** *(if applicable)*: .....
6. **Relationship between third party and client:** .....

Individual Identification Information Record

NOTE: *Only complete Sections C and D for your clients.*

C. Client Risk *(ask your Compliance Officer if this section is applicable)*

Determine the level of risk of a money laundering or terrorist financing offence for this client by determining the appropriate cluster of client in your policies and procedures manual this client falls into and checking one of the checkboxes below:

Low Risk

☑ Canadian Citizen or Resident Physically Present

☐ Canadian Citizen or Resident Not Physically Present

☐ Canadian Citizen or Resident – High Crime Area – No Other Higher Risk Factors Evident

☐ Foreign Citizen or Resident that does not Operate in a High Risk Country (physically present or not)

☐ Other, explain:

Medium Risk

☐ Explain:

High Risk

☐ Foreign Citizen or Resident that operates in a High Risk Country (physically present or not)

☐ Other, explain:

If you determined that the client's risk was high, tell your brokerage's Compliance Officer. They will want to consider this when conducting the overall brokerage risk assessment, which occurs every two years. It will also be relevant in completing Section D below. Note that your brokerage may have developed other clusters not listed above. If no cluster is appropriate, the agent will need to provide a risk assessment of the client, and explain their assessment, in the relevant space above.

Individual Identification Information Record

D. Business Relationship

(ask your Compliance Officer when this section is applicable)

D.1. Purpose and Intended Nature of the Business Relationship

Check the appropriate boxes.

Acting as an agent for the purchase or sale of:

- ☑ Residential property
- ☐ Commercial property
- ☐ Other, please specify: .....
- ☐ Residential property for income purposes
- ☐ Land for Commercial Use

D.2. Measures Taken to Monitor Business Relationship and Keep Client Information Up-To-Date

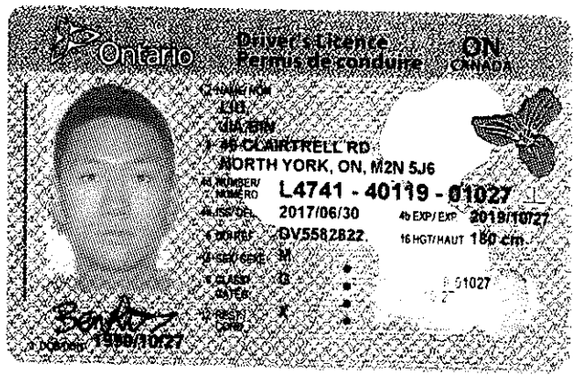
D.2.1. Ask the Client if their name, address or principal business or occupation has changed and if it has include the updated information on page one.

D.2.2 Keep all relevant correspondence with the client on file in order to maintain a record of the information you have used to monitor the business relationship with the client. Optional - if you have taken measures beyond simply keeping correspondence on file, specify them here:

D.2.3. If the client is high risk you must conduct enhanced measures to monitor the brokerage's business relationship and keep their client information up to date. Optional - consult your Compliance Officer and document what enhanced measures you have applied:

D.3 Suspicious Transactions

Don't forget, if you see something suspicious during the transaction report it to your Compliance Officer. Consult your policies and procedures manual for more information.


Ontario
Driver's Licence
Permis de conduire
ON
CANADA
LIU
[redacted]
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NORTH YORK, ON, M2N 5J6
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2017/06/30
4b EXP/EXP 2019/10/27
DV5582822
16 HGT/HAUT 180 cm
M
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X
1998/10/27

BV 12C6

PIN

JIA LIU
442 HUNTINGTON RIDGE DR
MISSISSAUGA ON L5R 0A9

March 28, 2016

Line of Credit Application Number	4425270485
Mortgage Loan Application Number	3076304629

Thank you for choosing CIBC for your borrowing needs. Our goal is to help you achieve what matters to you financially, and we appreciate the opportunity to meet your needs.

Based on the information you provided in your recent application, we are pleased to have conditionally approved you for a total CIBC Home Power Plan® limit of $229,520.00 secured by:

REAL ESTATE:
1206 TBA PSV TOWER ONE RD MISSISSAUGA ON L1L1L1

The key terms and conditions of the approval are outlined below. Other important terms and conditions applicable to your CIBC Home Power Plan are found in the CIBC Home Power Plan Agreement, CIBC Line of Credit Statement of Disclosure and Mortgage Disclosure Statement which will be provided to you prior to the release of funds.

This approval is conditional upon us receiving the following and finding the following to be satisfactory:

- Amendment to Agreement of Purchase and Sale with JIA LIU as sole buyer

If you do not meet the condition(s) stated above at least 10 business days prior to the release of funds, we may cancel this conditional approval without notice to you.

Before funds are disbursed, the following conditions must be met:

- New Home Warranty
- LOAN C-MERCEDES BENZ F $16,000.00 to be paid prior to advance
- The survey and title to the property must be satisfactory to us and our solicitor.
- The sale must close in accordance with the terms set out in your purchase and sale agreement.
- The information provided in support of your application must be accurate, and there must be no change to the information or to your financial situation since the application was submitted.
- All documents we require must be completed to our satisfaction.

If you wish to select a different product, or if any of the information in your application changes, we may require you to re-qualify for approval.

This letter replaces all previous versions.

Customer Consent & Disclosure

Quebec residents only: It is the express wish of the parties that this document and any related documents be drawn up in English *Les parties aux présentes ont expressément demandé que ce document et tous les documents s'y rattachant soient rédigés en anglais*

I consent to the collection, use and sharing of my personal information as described in C BC s privacy policy *Your Privacy is Protected*. This includes collecting, during the course of my relationship with CIBC, information about me from, and sharing it with, the CIBC Group, credit bureaus, government institutions or registries, regulators and self-regulatory organizations, other financial institutions, any references I give you, and other such parties as may reasonably be required for the purposes of (i) identifying me, (ii) qualifying me (or someone I am providing a guarantee for) for products and services, (iii) verifying information I give you, (iv) protecting me and CIBC from error and criminal activity, (v) facilitating tax and other reporting, (vi) complying with legal and regulatory obligations, or (vii) telling me about other products and services of the CIBC Group. If I wish to withdraw my consent to (vii) I may contact CIBC at 1-800-465-CIBC (2422) at any time. I will not be refused products or services just because I withdraw my consent to the use of my information for marketing purposes

Your agents and service providers and if the mortgage is insured, the insurer, may obtain a credit report and other information about me, from any credit bureau or reporting agency and / or from you. "Service provider" means a person or entity that has been engaged in connection with (i) the servicing, origination, insurance, maintenance, collection or operation of my/our mortgage, or (ii) the provision of services or benefits to me/us, including loyalty programs

Referral Sources I authorize you to notify the referral source involved in this transaction, if any, whether my application for a mortgage has been approved, of any conditional financing requirements and the mortgage amount. I acknowledge that CIBC has advised me of and I consent to payment by CIBC of a referral fee, where applicable, to the referral source including, but not limited to, real estate brokerage, builder or developer

Including a Social Insurance Number (SIN) in a credit bureau request is the best way to make sure credit bureau information accurately refers to the right person. However, this is completely voluntary, and I understand that if I choose not to give permission, this by itself will not prevent me from continuing the application. By checking the box below I give my consent to include my SIN in a credit bureau request

Acknowledgment and Option to Provide Express Consent to Receive Electronic Messages form CIBC and HLC

Real Estate Secured Lending. CIBC is pleased to be able to provide alternatives for your real estate secured lending needs.

☒ **Yes,** I agree that if CIBC is unable to meet my financing needs, I may be contacted by HLC Home Loans Canada (HLC), a mortgage brokerage subsidiary of CIBC, who may attempt to locate another lender ("alternate lender") on my behalf. I acknowledge and agree that (a) a HLC Mortgage Consultant may contact me to discuss my financing needs and to provide me with information on financing products at the telephone number(s), e-mail(s) or other contact information I have given you, and (b) to assist the Consultant, CIBC may disclose to HLC my personal information from its credit file which may include financially related information including credit bureau reports and employment information. I acknowledge that CIBC is not under an obligation to locate an alternate lender and are not liable for any acts or omissions of another lender.

☒ **Yes,** I/we agree that CIBC may send me/us electronic messages and provide me/us with information on financing products through electronic means. I/we may withdraw consent at any time.

☒ **Yes,** I/we agree that HLC Home Loans Canada may send me/us electronic messages and provide me/us with information on financing products through electronic means. I/we may withdraw consent at any time.

647-889-4628

Phone Number — Email Address

CIBC Head Office, Commerce Court, Toronto, Ontario, Canada M5L 1A2; www.cibc.com
HLC Head Office, 55 Yonge Street, 7th Floor, Toronto, ON M5E 1J4; www.hlcmortgages.com

I have read and agree to the provisions of this document, and I acknowledge receiving a copy of it.

☒ SIN	Mar 16, 2016 Date	JIA BIN LIU Name of Applicant (Please Print)	Signature of Applicant
☐ SIN	Date	Name of Co-Applicant (Please Print)	Signature of Co-Applicant
	Mar 16, 2016 Date	RS788CON ID #	Mortgage Advisor Signature

Application for Creditor Insurance for CIBC Mortgages

Canada Life

Note: You cannot use this Application to cancel any existing insurance you may currently have on the CIBC mortgage loan referenced in Step 1 below.
This mortgage loan is under a CIBC Home Power Plan®

Step 1 – Information about you and your Mortgage Loan

Current Date *(mmm/dd/yyyy)*: Apr/01/2016

Rep ID No.: RS788CON

Branch and Transit:

Address of Mortgage Property: TBA PSV TOWER ONE Road Unit 1206 MISSISSAUGA ON L1L1L1

Mortgage No. / Reference No.: 3076304629

Mortgage Loan Amount: $ 229,519.00

Mortgage Loan Payment (including P&I and insurance premium (and applicable taxes)): $ 933.87 Monthly

Fixed Monthly Benefit Amount: $ 900.00

Applicant 1

Last Name: LIU

First Name: JIA BIN

Initial:

Date of Birth *(mmm/dd/yyyy)*: Oct/27/1990

Age: 25

Home Telephone No.: (647) 889-4628

Business Telephone No. / Ext:

Current Address: Street No. and Name: 442 HUNTINGTON RIDGE Drive

City: MISSISSAUGA

Province: ON

Postal Code: L5R0A9

Current Address Effective Until: Jun/30/2016

Applicant

Last Name:

First Name:

Initial:

Date of Birth *(mmm/dd/yyyy)*:

Age:

Home Telephone No.:

Business Telephone No. / Ext:

Current Address: Street No. and Name:

City:

Province:

Postal Code:

Current Address Effective Until:

Step 2 – Insurance selection and insurance premiums for your mortgage loan

Each applicant's insurance selection is indicated in the applicable box :

Creditor Insurance Type	Applicant 1 JIA BIN LIU	Applicant	Creditor Insurance Premium Monthly	
Life Insurance	**Applied**		$ 19.83	single coverage
Disability Insurance Plus (DI + Job Loss)	**Waived**		$ 0.00	no coverage
Disability Insurance	**Applied**		$ 13.12	single coverage
		Total Insurance Premium	**$ 32.95**	

BANK COPY

Step 3 – Initial your response to the applicable Health Questions

Applicant 1

JIA BIN LIU

Health Questions for CIBC Creditor Insurance

The following health questions relate to JIA BIN LIU's application for creditor insurance for the mortgage loan identified in Step 1. Refer to Step 2 for details of your insurance selection.

Health Questions		INITIAL YOUR RESPONSE
A. For ALL types of insurance coverage, you must answer this question.	In the past 24 months, have you received any **medical treatment, tests, advice, consultation or follow-up** for, or been diagnosed with, or **taken medication** for, or had any known **indication of:** • Problems relating to your heart or circulation, high blood pressure, high cholesterol levels, stroke or chest pains, cancer, tumor, leukemia, lupus, asthma, or any other lung or respiratory disorder (other than colds or flu), **OR** • Diabetes, liver or kidney disease, problems relating to your stomach, bowel rectum,bladder or prostate, disorder of the uterus or ovaries, multiple sclerosis, epilepsy, paralysis of any kind, or other disorder of the nervous system, **OR** • AIDS (Acquired Immune Deficiency Syndrome), HIV (Human Immunodeficiency Virus), ARC (AIDS Related Complex), alcohol or substance abuse, depression or other mental, nervous or psychiatric disorder?	Yes Initial here OR No Initial here
B. You must answer these questions if you are applying for: • **Mortgage Disability OR** • **Mortgage Disability Plus**	1. In the past 24 months, have you received any **medical treatment, tests, advice, consultation or follow-up** for, or been diagnosed with, or **taken medication** for, or had any **known indication of:** • disorders, arthritis, sprains, strains or other problems or conditions of the neck, back, shoulder, elbow or other joints, muscles, ligaments or tendons?	Yes Initial here OR No Initial here
	2. Are you currently receiving disability or Worker's Compensation benefits or have you ever received disability or Worker's Compensation benefits for a period of longer than one month?	Yes Initial here OR No Initial here

Why we ask health questions and what you can expect next...

This health information is collected and used by **The Canada Life Assurance Company ("Canada Life")** to determine if insurance coverage will be available for you. It is important and it is your responsibility to ensure that the information provided by you is true and complete. In the event of a claim, answers to the health questions may be reviewed.

Your application may be eligible for automatic approval depending on your answer to the health questions. See **"When your Creditor Insurance begins" in your Certificate of Insurance.**

If you are not eligible for automatic approval, **Canada Life** will review your application for insurance coverage and may **contact you by phone** to obtain some additional medical information. In some cases paramedical testing or medical information from your family physician may be required. Insurance will only be in force when you are approved by Canada Life.

Further details are contained in your Certificate of Insurance.

BANK COPY

Step 4 – Please read carefully before signing

You understand that Creditor Insurance for your mortgage loan is optional. It is not required to obtain any CIBC products or services.

If you are NOT applying for any Creditor Insurance as indicated in Step 2, your signature below means that you refuse insurance coverage or you have determined that you are not eligible for Creditor Insurance.

If you ARE applying for any Creditor Insurance as indicated in Step 2, you acknowledge and/or agree that:

- Creditor Insurance for CIBC Mortgages is creditor's group life insurance, creditor's group disability insurance and creditor's group disability and job loss insurance provided by Canada Life to Canadian Imperial Bank of Commerce ("CIBC"), as group policyholder. The insurance under Group Policy G 60230-01, Group Policy H 60129-301 and Group Policy H 60129-311/411 respectively
- You have received the Certificate of Insurance for the insurance coverage you have selected. You have been given an opportunity to review it
- You have read the section "Who can apply" in the Certificate of Insurance and you are eligible to apply for the insurance products you selected
- You are bound by the terms, conditions, limitations and exclusions of the Certificate of Insurance. You understand that limitations and exclusions describe when benefits are limited or not paid at all
- You can cancel your insurance coverage at any time. If you cancel within 30 days of receiving the Certificate of Insurance, you will receive a full refund of premiums paid and your insurance coverage is considered never to have been in force
- You have read the Health Questions in Step 3 of this Application and have answered the Health Questions accurately and completely
- If the above Mortgage Loan has been approved by CIBC, and you answer 'No' to the Health Questions in Step 3 above, your Application will be automatically approved by Canada Life and your insurance will begin on the date of this Application
- If your Application is not automatically approved, Canada Life will review your Application and additional health information may be required. Your insurance will begin when Canada Life advises you in writing that your Application has been approved. If your insurance coverage is not approved, Canada Life will provide you with a notice of decline
- Your insurance may be void if you conceal, misrepresent or make any false or incomplete answer or declaration on this Application or to any subsequent request for information in connection with this Application. If your insurance is voided, no insurance benefits will be paid.
- You have read the section called "Protecting your personal information" in the Certificate of Insurance. You consent to the collection, use and sharing of your personal information (excluding health information for CIBC) by Canada Life, its affiliates, agents and service providers or reinsurers for the purposes of assessing your insurability, administering services, processing claims and otherwise as described in the Certificate of Insurance. This consent shall take effect on the date you sign this Application. You understand that this consent may be revoked at any time. If you revoke this consent, Canada Life may not be able to issue or continue to administer insurance coverage for you. It may also not be possible to obtain proof of claims and result in claims not being paid. You understand the risks and benefits of consenting and refusing consent.
- A copy of this Application may be provided to all other borrowers and guarantors. This is done to satisfy regulatory obligations. CIBC and Canada Life may also advise these persons of the approval or decline of your Application, or if your insurance ends. You consent to having CIBC and Canada Life disclosing this information as described.
- This Application is for creditor insurance for the mortgage loan described in Step 1. You understand that this Application is not for creditor insurance on any other mortgage loan. If the mortgage loan described in Step 1 is under a CIBC Home Power Plan®, you understand that the insurance described in this Application does not apply to any other CIBC brand mortgage loan or CIBC line of credit under the CIBC Home Power Plan.
- If the insurance coverage on your mortgage loan is not approved by Canada Life, this Application serves to apply for the coverage described in the section "Prior Coverage Recognition if your Application was declined" in the Certificate of Insurance.
- CIBC is not an agent of Canada Life, and no employee of CIBC has the authority to waive or modify any provisions of this Application, the Certificate of Insurance or the applicable group insurance policy.
- CIBC receives an administration fee from Canada Life in respect of this creditor insurance. People promoting this creditor insurance on behalf of CIBC may receive compensation.
- Insurance premiums are due with your regular mortgage loan payment. The calculation of your premium is described in the Certificate of Insurance. You authorize CIBC to make withdrawals of the premium amount, plus any applicable taxes, from the same account from which you make mortgage loan payments.
- A photocopy or facsimile of this authorization will be as valid as the original.
- If the information on the Customer Copy and the Insurer/Bank Copy of this Application are different, the Insurer/Bank Copy will prevail.

For Quebec only: You have requested that this Application and all related documents be in English. *Vous avez demandé que la présente proposition et tous les documents s'y rattachant soient en anglais.* You acknowledge that you have been provided with the Distribution Guide(s) for the insurance coverage for which you applied.

Your signature below means that you acknowledge that you have read, understand and agree to the above information.

April 02, 2016
Date (mm/dd/yyyy)

LIU, JIA BIN
Client Name

Signature

Questions? Call the Creditor Insurance Helpline at 1 800 465-6020 or visit our website at www.cibc.com. Alternatively, you may contact Canada Life at the address in the Certificate of Insurance.

®CIBC Home Power Plan is a registered trademark of CIBC.

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Application for Creditor Insurance for CIBC Personal Lines of Credit (coverage up to $150,000)

Canada Life

Note: You cannot use this Application to cancel any existing insurance you may currently have on the CIBC Personal Line of Credit referenced in Step 1 below. This Personal Line of Credit is under a CIBC Home Power Plan℠

Step 1 – Information about you and your CIBC Personal Line of Credit (PLC)

Current Date *(mmm/dd/yyyy)*: Apr/01/2016	Rep ID No: RS788CON	Branch and Transit:
PLC No:	Bank Reference No:	Credit Limit: $1.00

Applicant 1

Last Name: LIU		
First Name: JIA BIN	Initial:	
Date of Birth *(mmm/dd/yyyy)*: Oct/27/1990	Age: 25	
Home Telephone No: (647) 889-4628	Business Telephone No. / Ext:	
Current Address, Street No. and Name: 442 HUNTINGTON RIDGE Drive		
City: MISSISSAUGA	Province: ON	Postal Code: L5R0A9
Current Address Effective Until: Jun/30/2016		

Applicant

Last Name:		
First Name:	Initial:	
Date of Birth *(mmm/dd/yyyy)*:	Age:	
Home Telephone No:	Business Telephone No. / Ext:	
Current Address, Street No. and Name:		
City:	Province:	Postal Code:
Current Address Effective Until:		

Step 2 – Insurance selection and insurance premiums for your PLC

Each applicant's insurance selection is indicated in the applicable box:

Creditor Insurance Type	Applicant 1 JIA BIN LIU	Applicant	Creditor Insurance Premium
Life Insurance	**Applied**		Insurance premiums (plus applicable taxes) are based on the calculation method set out in the Certificate of Insurance.
Disability Insurance	**Applied**		

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Step 3 – Please read carefully before signing

You understand that Creditor Insurance for your PLC is optional. It is not required to obtain any CIBC products or services.

If you are NOT applying for any Creditor Insurance as indicated in Step 2, your signature below means that you refuse insurance coverage or you have determined that you are not eligible for Creditor Insurance.

If you ARE applying for any creditor insurance as indicated in Step 2, you acknowledge and/or agree that:

- Creditor Insurance for CIBC Personal Lines of Credit is creditor's group life and disability insurance provided by Canada Life to Canadian Imperial Bank of Commerce ("CIBC"), as group policyholder, under Group Policy G/H 60149.
- You have received the Certificate of Insurance for the insurance coverage you have selected. You have been given an opportunity to review it.
- You are bound by the pre-existing condition exclusion provision and other terms, conditions, limitations and exclusions of the Certificate of Insurance. You understand that limitations and exclusions describe when benefits are limited or not paid at all.
- Your insurance up to $150,000 of your PLC balance comes into effect on the latter of i) the day you signed this Application, and ii) the day your PLC was approved.
- If you subsequently increase your PLC limit above $150,000, you must complete an Application for Creditor Insurance Limit Increase for CIBC Personal Lines of Credit and your insurance coverage for the PLC balance in excess of $150,000 begins on the day that Canada Life informs you in writing that the excess insurance coverage has been approved. If the insurance coverage is not approved, Canada Life will send you a notice of decline. The terms and conditions of your insurance coverage for the PLC balance of $150,000 or less will remain in force.
- If this Application is in relation to a PLC with a credit limit less than $150,000 and you subsequently increase the credit limit of your PLC up to $150,000, your insurance coverage will be extended to that limit. You will need to apply for any insurance coverage for PLC balances over $150,000. If you subsequently increase the credit limit of your PLC up to $300,000 and your Life Insurance coverage is approved, your Life Insurance coverage will be extended to a maximum of $300,000. If you subsequently increase the credit limit of your PLC up to $300,000 and your Disability Insurance coverage is approved, your Disability Insurance coverage will be extended to a maximum of $200,000.
- You can cancel your insurance coverage at any time. If you cancel within 30 days of receiving the Certificate of Insurance, you will receive a full refund of premiums paid and your insurance coverage is considered never to have been in force.
- Your insurance may be void if you conceal, misrepresent or make any false or incomplete answer or declaration on this Application or to any subsequent request for information in connection with this Application. If your insurance is voided, no insurance benefits will be paid.
- You have read the section called "Protecting your personal information" in the Certificate of Insurance. You consent to the collection, use and sharing of your personal information (excluding health information for CIBC) by Canada Life, its affiliates, agents and service providers or reinsurers for the purposes of assessing your insurability, administering services, processing claims and otherwise as described in the Certificate of Insurance. This consent shall take effect on the date you sign this Application. You understand that this consent may be revoked at any time. If you revoke this consent, Canada Life may not be able to issue or continue to administer insurance coverage for you. It may also not be possible to obtain proof of claims and result in claims not being paid. You understand the risks and benefits of consenting and refusing consent.
- A copy of this Application may be provided to all other borrowers and guarantors. This is done to satisfy regulatory obligations. CIBC and Canada Life may also advise these persons of the approval or decline of your Application, or if your insurance ends. You consent to having CIBC and Canada Life disclosing this information as described.
- This Application is for creditor insurance for the PLC described in Step 1. You understand that this Application is not for creditor insurance on any other PLC. If the PLC described in Step 1 is under a CIBC Home Power Plan®, you understand that the insurance described in this Application does not apply to any other CIBC Line of Credit or mortgage loan under the CIBC Home Power Plan®.
- CIBC is not an agent of Canada Life, and no employee of CIBC has the authority to waive or modify any provisions of this Application, the Certificate of Insurance or the group insurance policy.
- CIBC receives an administration fee from Canada Life in respect of this creditor insurance. People promoting this creditor insurance on behalf of CIBC may receive compensation.
- Insurance premiums, plus any applicable taxes, will be debited directly to your PLC on your PLC billing date. The calculation of your premium is described in the Certificate of Insurance.
- A photocopy or facsimile of this authorization will be as valid as the original.
- If the information on the Customer Copy and the Insurer/Bank Copy of this Application are different, the Insurer/Bank Copy will prevail.

For Quebec only: You have requested that this Application and all related documents be in English. Vous avez demandé que la présente proposition et tous les documents s'y rattachant soient en anglais. You acknowledge that you have been provided with the Distribution Guide(s) for the insurance coverage for which you applied.

Your signature below means that you acknowledge that you have read, understand and agree to the above information.

April 2, 2016
Date (mmm/dd/yyyy)

LIU JIA RUN
Client Name

Signature

Questions? Call the Creditor Insurance Helpline at 1 800 465-6020 or visit our website at www.cibc.com. Alternatively, you may contact Canada Life at the address in the Certificate of Insurance.

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Borrower Acknowledgement

*indicates Mandatory fields

Application Reference Number: CIBC - 166861

Address Information

*Property Address
1206 - PSV TOWER ONE Road

*City
MISSISSAUGA

*Province
ON

Accuracy of Application Information

You confirm the application information you provided to CIBC is a complete and factual statement of your financial affairs

Consent to Timing of Receipt of Mortgage Disclosure Statement

If you enter into a mortgage loan agreement with us, you have the right to receive a disclosure statement that provides details about the mortgage loan and the cost of borrowing. You can choose when you wish to receive the disclosure statement; you can receive it when you sign the mortgage loan agreement, or you can receive it at least two business days before you sign the mortgage loan agreement. By signing below you agree to receive the disclosure statement no later than the time you sign the mortgage loan agreement. If you wish to receive the disclosure statement at least two business days before you sign the mortgage loan agreement, you can contact us at 1 888 264-6843. In some cases this may delay your mortgage loan closing date.

April 2, 2016
Date

JIA BIN LIU
Name of Borrower

X
Signature of Borrower

10879-2014-05

Pre-Authorized Debit Request

Product Type: Mortgage Loan

To: CANADIAN IMPERIAL BANK OF COMMERCE

Mortgage Loan No: CIBC-166861

Property Address: 1206 - PSV TOWER ONE Road MISSISSAUGA Ontario

I/We hereby request and authorize Canadian Imperial Bank of Commerce ("CIBC") to debit my/our account at the bank or financial institution indicated below (or at any of its branches) for the purpose of paying my/our mortgage loan payment amount of $ on a basis commencing on the day of , 20 (These pre-authorized debits are for personal purposes.) If I, or any of the clients signing this form, applied for and were approved for creditor insurance provided by The Canada Life Assurance Company in connection with my/our Mortgage Loan (or if I/we apply for such insurance in the future), we acknowledge and agree that the insurance premium will be added to and collected with my/our regular mortgage loan payment and debited from my/our account along with my/our scheduled Pre-Authorized Debits. The amount of the insurance premium can be found in my/our creditor insurance application and Certificate of Insurance or any recent correspondence from the insurer about my/our premium.

I/We agree to provide 30 days written notice of any changes in my/our banking information. **We waive the requirement for CIBC to provide written notice of the amount and date of each withdrawal from my/our designated account and of any change in the amount or date of any withdrawal for any reason. This payment authorization may be assigned by CIBC.** I/We can cancel this payment authorization at any time by giving written notice to CIBC at least 30 calendar days before the due date of the next pre-authorized debit. I/We can obtain a sample cancellation form or further information on my/our right to cancel this payment authorization at my/our financial institution or by visiting ww cdnpay ca

Name of Bank/Financial Institution

Telephone No

Branch Address

Branch City

Branch Province

Branch Postal Code

Transit No | Institution No | Account No | Account Type

☐ Savings with Chequing ☐ Chequing Only

N.B. Savings accounts without chequing privileges or personal lines of credit, accounts outside Canada, VISA, MasterCard cannot be used for Pre-authorized debit withdrawals. Post-dated cheques are not acceptable.

We enclose a sample "VOID" cheque

Affix sample cheque here

AFFIX SAMPLE CHEQUE HERE

We have certain recourse rights if any debit does not comply with this a greement. We have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on our recourse rights, we may contact our financial institution or visit the Canadian Payments Association at www.cdnpay.ca

LIU, JIA BIN — Client's Name

X — Signature

April 2, 2016 — Date (mmm/dd/yyyy)

Client's Name — X Signature — Date (mmm/dd/yyyy)

Guarantor's Name — X Signature — Date (mmm/dd/yyyy)

If at any time you wish to change your banking information, please call CIBC Mortgage Servicing at 1-888-264-6843 or visit any CIBC Branch

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