



Application for a Retirement Compensation Arrangement (RCA) Account Number

Employer's language of choice. English French

Custodian's language of choice. English French

| |
|-------------------------|
| Do not use this area |
| Employer account number |

Attach a signed copy of the retirement compensation arrangement (RCA) trust agreement to this application.

| | |
|------------------------------------|--------------------------------|
| Employer's legal name | |
| Employer's address | Mailing address (if different) |
| Name of employer's representative | |
| RCA trust's name | |
| Custodian's name | Telephone number |
| Custodian's address | Mailing address (if different) |
| Name of custodian's representative | |
| Telephone number | |

If you made contributions to the custodian for this RCA trust, list the dates and amounts of those contributions (attach a separate list if necessary).

| Date | Amount | Date | Amount | Date | Amount |
|------|--------|------|--------|------|--------|
| | \$ | | \$ | | \$ |
| | \$ | | \$ | | \$ |
| | \$ | | \$ | | \$ |
| | \$ | | \$ | | \$ |

If you intend to contribute to the custodian in the year the RCA becomes effective, list the expected dates and amounts of those contributions (attach a separate list if necessary).

| Date | Amount | Date | Amount | Date | Amount |
|------|--------|------|--------|------|--------|
| | \$ | | \$ | | \$ |
| | \$ | | \$ | | \$ |
| | \$ | | \$ | | \$ |
| | \$ | | \$ | | \$ |

Important

Any employer entering, or who have entered, into an RCA has to withhold a 50% tax from each contribution made to the custodian of the RCA. The employer has to remit the tax withheld to the receiver general for Canada no later than the 15th day of the month after the month in which the tax was withheld.

Address where books and records of the RCA trust will be kept (select one box only).

1 Employer's address 2 Custodian's address

3 Other address _____

Will the custodian make distributions out of this RCA trust to more than one employee? Yes 1 No 2

Certification

I certify that the information on this form is correct and complete.

Date

Signature

Send your completed application and a signed copy of the RCA trust agreement to the RCA Unit, Winnipeg Tax Centre, 66 Stapon Road, Winnipeg MB R3C 3M2. Keep a photocopy for your records.