
Owner Information

Last Name First Name Social Insurance Number (SIN) Date of Birth (dd-mm-yyyy)

Address: _____
No. Street City Province Postal Code

Telephone Number Email Address

Owner's Previous Address:

No. Street City Province Postal Code

Are you the owner? Yes No

If you answered "No" above: Requestor's Information

Last Name First Name Affiliation to the Owner (provide supporting documents)

Address: _____
No. Street City Province Postal Code

Telephone Number Email Address

Is the owner of the unclaimed property still alive? Yes No

If not, please provide the date of death (dd-mm-yyyy): _____

Description of Unclaimed Property

The unclaimed property is part of a: Individual Account Joint Account

Description of Unclaimed Property: Open RESP TFSA RRSP GRSP RRIF RSLP LIRA LIF

Client Number Account Number

X _____
Signature Date (dd-mm-yyyy)

Please submit the completed form as well as all required documentation to:

Investia Financial Services Inc.
1080 Grande Allée West
PO Box 1907, Station Terminus
Quebec City, Quebec G1K 7M3