

Request to Remove Spousal (Contributor) Designation on a RRIF due to Marriage Breakdown

Forward to: Manulife Financial
 Group Retirement Solutions
 2000 Mansfield, Suite 1410
 MONTRÉAL QC H3A 3A2

1 Request requirements

Last name of member		First name		Middle initial
Policy number	Contributor name		Member number	

I hereby request Manulife Financial to remove the name of the contributor on the aforementioned account, thereby deeming this RRIF a personal RRIF.

2 Canada Revenue Agency requirements

Canada Revenue Agency (CRA) has outlined that removal of spousal/contributor information on a RRIF account may only be done when certain conditions are fulfilled (outlined below). All three of these conditions must be met; if you do not attest to these requirements below, we will be unable to fulfill your request.

Please check off and confirm the following:

- I am separated from my spouse/common-law spouse and we are living apart as of the date of this request
- I confirm that my spouse/common-law spouse, former spouse/common-law spouse did not contribute to **any** of my RRSPs in the calendar year of this request, nor in the two years immediately preceding this request.
- No more than the minimum was withdrawn in the year of this request.

3 Updated account information

Note: If you are including change of name, a witness' signature is required in Section 4.

Subject to satisfactory evidence outlined in the section above, please complete the following information in order to make any updates to your Manulife Financial RRIF information:

Last name of member		First name		S.I.N.	
Mailing address (number, street and apt. number)		City		Province	Postal code
Telephone number		Marital status			

4 Authorization and signature

I authorize Manulife Financial to remove the spousal/contributor information on the account noted above, and deem this account a non-spousal RRIF. I have read and understood the CRA requirements outlined and I certify that the information on this form is correct to the best of my knowledge.

Member's signature	Date signed (dd/mmm/yyyy)
Irrevocable beneficiary's signature (if required)	Date signed (dd/mmm/yyyy)
Witness' signature (required on name change)	Date signed (dd/mmm/yyyy)