



**A: Account Information**

Account Holder Last Name \_\_\_\_\_ First name \_\_\_\_\_ Init. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Social Insurance Number \_\_\_\_\_ Home Telephone Number \_\_\_\_\_ Business Telephone Number \_\_\_\_\_

Account Number \_\_\_\_\_ Plan Number \_\_\_\_\_

**B: Withdrawal Details**

**1. Check One Only:**

- Full Withdrawal
- Full Withdrawal In-Kind (Certificate Number \_\_\_\_\_, Number of Shares \_\_\_\_\_  
Re-register certificate to \_\_\_\_\_)
- \$ \_\_\_\_\_ Partial – Gross (amount will be reduced by any fees)
- \$ \_\_\_\_\_ Partial – Net (amount required after any fees)
- \$ \_\_\_\_\_ Partial – In-Kind (Certificate Number \_\_\_\_\_, Number of Shares \_\_\_\_\_  
Re-register certificate to \_\_\_\_\_)

refer to the WPTC Self-Administered Fee Schedule for current rates

*I agree to indemnify and save harmless Western Pacific Trust Company for any taxes, assessments and other charges levied or imposed by any Governmental authority to my plan at any time.*

**C: Delivery Instructions**

- \*\*Home address (see (A) above)**
  - Send by:  Regular Mail – no additional charges apply.
  - Registered Mail – applicable charges will be applied to your account.
- Will pick up at WPTC’s office (Envelope will be in the name of Client, ID must be shown)
- OTHER: \_\_\_\_\_

\*\*WPTC will forward all cheques by regular mail unless other arrangements have been made.

**D: Authorization**

Client Signature \_\_\_\_\_ Date \_\_\_\_\_