


INFORMATION ABOUT YOU

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| Primary Borrower Name MR RAHUL- HARILAL KASWALA | | Scotiabank Credit Card Account / Reference Number 4537355714657014 | |
| Mailing Address (Number, Street) 51 MOUNTLAND DR | | | |
| City SCARBOROUGH | | Province ON | Postal Code M1G2N7 |
| Date of Birth (yyyy/mm/dd) 1990/08/30 | | Home Phone Number 437 5451001 | Business Phone Number |

BRANCH INFORMATION

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| Location | Transit (BLT) | Telephone Number | Branch Advisor Name | I acknowledge that I have provided the Scotia Credit Card Protection Product Booklet (Product Summary and Fact Sheet in Quebec) to the customer. Asad Mirza Advisor name |
| MARKHAM & ELLESMERE, SCARB | 32292 | 416 439-6700 | Asad Mirza | |

Please review the Scotia Credit Card Protection Product Booklet (Product Summary and Fact Sheet in Quebec) and read the following section carefully before signing this Application

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| Optional | You do not need to apply for this insurance coverage to be approved for a Credit Card. |
| Eligibility | You confirm that You are between 18 and under 70 years of age, the Primary Borrower on the Credit Card Account and a Resident in Canada at the time of Your application. |
| Benefits | <p>There are two different coverage bundles to choose from:</p> <ol style="list-style-type: none"> Basic Protection bundle which includes Life, Critical Illness and Hospitalization benefits. Comprehensive Protection bundle which includes the benefits listed in the Basic Protection bundle plus Disability, Job Loss, and Strike or Lockout benefits. <p>Life, Critical Illness and Hospitalization insurance can pay off Your outstanding Account Balance up to \$50,000 if You die, are diagnosed with a specific critical illness or if You are Hospitalized for 30 consecutive days or more. If the Hospitalization is for a minimum of 24 consecutive hours but less than 30 consecutive days 20% of Your outstanding Account Balance on the date of Hospitalization may be paid.</p> <p>Disability, Job Loss, and Strike or Lockout insurance can make monthly payments, equal to 20% of Your outstanding Account Balance, up to \$10,000 per month, for up to 5 months, to Your insured Account.</p> |
| Cost | <ul style="list-style-type: none"> The premium rate for coverage is based on Your Daily Account Balance which is calculated daily and billed monthly. For Comprehensive Protection the monthly premium rate is \$1.09 per \$100 of Your Account Balance and for Basic Protection the monthly premium rate is \$0.89 per \$100 of Your Account Balance until Your 70th birthday, at which time both bundles reduce to only the Death Benefit (Life Insurance) at a monthly premium rate of \$0.49 per \$100 of Your Account Balance. Your Account Balance is insured for up to \$50,000, however, premiums are only calculated on a maximum of \$25,000. |
| Conditions, Exclusions and Waiting Periods | <p>Some conditions, exclusions, limitations and waiting periods apply. They include, but are not limited to:</p> <ul style="list-style-type: none"> No benefit is paid if a death Critical Illness, Hospitalization or Disability occurs within 12 months of the Effective Date of coverage due to a pre-existing condition. To be eligible for Job Loss or Disability benefits You must be employed at least 90 consecutive days for at least 20 hours each week immediately prior to the date of Disability or Job Loss. For those enrolled in Post-secondary Education the number of employment hours required each week is 10. If You are self-employed, the Job Loss benefit will only be paid if You are unemployed for 90 consecutive days from a business that has been registered for a minimum of 12 consecutive months prior to the date of Job Loss. If the Strike or Lockout lasts for less than 30 consecutive days, the related benefit is not payable. No benefit is paid for Job Loss if the Claimant became unemployed within 30 days of the Effective Date of coverage; or unemployment is the direct/indirect result of resignation, retirement from employment, or dismissal for cause. |

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| When does coverage begin and end? | Your coverage begins on the Effective Date indicated on the Schedule of Coverage that You will receive with Your Certificate of Insurance within 30 days after this Application has been approved. Critical Illness, Disability, Hospitalization, Job Loss and Strike or Lockout insurance terminates at age 70; Life insurance terminates on Your 80th birthday. |
| 30 Day Review | If You decide this coverage is not right for You, You may cancel it at any time. If You cancel within 30 days of the coverage Effective Date You will receive a full refund of any premium paid. |
| Other Important Information | <ul style="list-style-type: none"> • If Your application is approved, You understand that You will receive confirmation of coverage and a Certificate of Insurance and agree to be bound by the terms and conditions contained therein. • You authorize Scotiabank to charge the insurance premium and applicable sales tax to Your Scotiabank Credit Card Account identified in this Application. • You acknowledge and fully understand that The Bank of Nova Scotia and its employees are not agents of Chubb Life Insurance Company of Canada, nor can they waive or change any terms of the Scotia Credit Card Protection plan. • The Bank of Nova Scotia receives an administration fee from the Insurer to distribute this insurance. • You have requested that this Application and the associated documents be in English. Vous avez demandé que le présent formulaire, ainsi que tous les documents qui s'y rattachent soient rédigés en anglais. |

I acknowledge and declare that I have been provided with a Scotia Credit Card Protection Product Booklet (Product Summary and Fact Sheet in Quebec) and that I understand, and agree to, the information above and want to apply for Scotia Credit Card Protection:

☐ Yes (Comprehensive Protection Insurance)
 ☐ Yes (Basic Protection Insurance)
 ☒ No

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| Primary Borrower Signature: | Date (yyyy/mm/dd): 2023/09/16 |
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