

## PRIMERICA LIFE INSURANCE COMPANY OF CANADA

6985 Financial Drive, Unit 400, Mississauga, Ontario L5N 0G3, 1-800-387-7876 (TTY: 1-855-774-8899)

### Pre-Authorized Debits Terms and Conditions

- **By consenting to Pre-Authorized Debits on the Coverage Election Form, you hereby waive any pre-notification requirements of the Canadian Payments Association Rule H1 ("Rule H1") with regards to Pre-Authorized Debits.**
- You hereby authorize Primerica Life Insurance Company of Canada ("Primerica Life") to begin monthly deductions as per your instructions on the Coverage Election Form for payment of life insurance premiums. Premiums in arrears will be immediately debited from your bank account.
- You acknowledge that this Authorization is provided for the benefit of Primerica Life and your financial institution and is provided in consideration of your financial institution agreeing to process debits against your account in accordance with rules of the Canadian Payment Association.
- If this policy is owned by an individual, your debit will be considered a Personal Pre-Authorized Debit ("PAD") by Canadian Payment Association definition. If this is for business purposes it will be considered a Business PAD.
- You confirm that all persons whose signatures are required to authorize withdrawals from the bank account specified in this Agreement have signed on the Coverage Election Form of this document.
- You undertake to inform Primerica Life, in writing, of any change in the account information provided in this authorization at least 30 days prior to the next date of the Pre-Authorized Debit.
- The entry on your financial institution's account statement showing that a pre-authorized debit has been made will be your notice of our receipt of your premiums.
- If a pre-authorized debit is returned due to insufficient funds ("NSF"), Primerica Life is authorized to re-submit the payment within approximately 10 business days after the original debit date. You acknowledge and agree that you are fully liable for any and all charges or fees that may be incurred if the debits cannot be made due to NSF or any other reason for which you may be held accountable.
- You may change these instructions or cancel this plan at any time, provided that you provide Primerica Life with at least 30 days notice in writing to Primerica Life Insurance Company of Canada, Customer Service Department, P.O. BOX 174, Streetsville, Ontario, L5M 2B8 or by telephone at 1-800-387-7876 (English), available Monday to Friday between the hours of 9:00 a.m. and 6:00 p.m. (Eastern Standard Time). To obtain a copy of a cancellation form or for more information regarding your right to cancel a Pre-Authorized Debit agreement, please consult with your financial institution or visit the Canadian Payments Association website at [www.cdnpay.ca](http://www.cdnpay.ca). You agree to release the financial institution of all liability if the revocation is not respected, except in the case of gross negligence by the financial institution.
- You acknowledge the financial institution is not required to verify that the Pre-Authorized Debit has been issued in accordance with the particulars of your authorization, including, but not limited to, the amount, or that any purpose of payment for which the Pre-Authorized Debit was issued has been fulfilled by Primerica Life as a condition of honouring a Pre-Authorized Debit issued or caused to be issued by Primerica Life on your account.
- Revocation of this authorization does not terminate any contract for goods or services that exist between you and Primerica Life where alternative payment arrangements have been made to the satisfaction of Primerica Life, and in such manner that you, in your sole responsibility, ensure that life insurance payments for the entire amount due continue to be received by Primerica Life as they become due.
- You acknowledge that if the Pre-Authorized Debit is terminated for any reason, any premium past due at the time of termination and any premiums due after the date of termination will be payable at the premium rate and in accordance with the payment schedule which would have been applicable to the policy if you had not chosen to participate in monthly Pre-Authorized Debits.
- Your authorization applies only to the method of payment and does not otherwise have any bearing on the contract for goods or services exchanged, except where otherwise specified and as in accordance with Provincial and Federal laws.
- You have certain recourse rights if a Pre-Authorized Debit does not comply with this Agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this Agreement. To obtain more information or your recourse rights, you may contact your financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).
- You agree that the information in this form will be shared with the financial institution, insofar as the disclosure of this information is directly related to and necessary for the proper application of the rules applicable for Pre-Authorized Debits.
- You have requested this Agreement and all other documents relating hereto to be English. J'ai exigé que ce formulaire et tous les documents y afférant soient rédigés en anglais.

## CONSENT TO ELECTRONIC DELIVERY OF POLICY AND RELATED DISCLOSURES

By consenting to Electronic Policy Delivery on the Coverage Election Form, you agree to electronic delivery of your Primerica Life Insurance Company of Canada insurance policy and related materials, as well as each of the following terms:

**Access and Delivery of Your Policy** – If your policy is issued, you will receive an email from us at the below email address letting you know that your policy is available at <https://my.primerica.com>. You agree to promptly access and view your policy once you receive this email. Certain of your rights under the policy (such as your right to terminate your coverage and receive a complete refund) and certain of Primerica's rights under the policy (such as the right to contest a claim for benefits under the policy based on statements in your application), may be dependent on when you receive your policy or other related information. You are considered to have received your policy and other related information when we notify you at the email address below and tell you that your policy or other related information is waiting for you. Until a policy is issued and delivered to you at <https://my.primerica.com>, the only coverage that may be in place is Conditional Coverage, if any, exists.

**Scope of Communications To Be Provided in Electronic Form** – You agree that we may provide you with any communications that we may choose to make available in electronic format, to the extent allowed by law, unless and until you withdraw your consent as described below. We may also continue sending paper communications to you. Your consent to receive electronic communications and transactions includes, but is not limited to, all notices, disclosures, authorizations, acknowledgements and other documents relating to your life insurance policy.

**Electronic Form and Hardware/Software Requirements** – Your policy and other related information that we may send to you electronically will be provided in pdf format. You agree that you can open materials sent in pdf format. To obtain free pdf software, go to [www.adobe.com](http://www.adobe.com). The computer hardware and software used to access the internet is all you will need to view your life insurance policy and other related information. To retain a copy of these materials, you may save them, print them or email them to where you can save or print them. To save an electronic copy, you may need up to 13,000 bytes per page. You may also view your policy and other related information at any time by logging onto <https://my.primerica.com>.

**How to Update Your Email Address** – To update your email address prior to registering on [my.primerica.com](https://my.primerica.com), either email us at [plicc\\_cn@primerica.com](mailto:plicc_cn@primerica.com) or write to us at P.O. Box 174, Streetsville, Ontario L5M 2B8, and tell us your previous email address, your new email address and policy number. Once you have registered, you may update your email address on your Client Profile.

**How to Withdraw Consent or Request Paper Copies** – If you would like to receive a paper copy of your policy and related disclosures or wish to withdraw consent to receive future notices and disclosures in electronic form, you must either email us at [plicc\\_cn@primerica.com](mailto:plicc_cn@primerica.com) or write to us at P.O. Box 174, Streetsville, Ontario L5M 2B8 and tell us your full name, email address, Canadian Postal address, telephone number, and policy number.

**Troubleshooting** – If you have trouble accessing <https://my.primerica.com> to view your policy and related disclosures, you may contact us at 1-888-737-2255.