

LINE OF CREDIT APPLICATION

		JOINT INTEN	IT	
Any person, whether ma The undersigned intend		separate credit. If this is an appli	ication for joint credit, please	e initial here.
Applicant	Applicant	Applicant	Applicant	Applicant
	mount \$	Yes 🗌 No If yes: Approximat	ng: 1 Month Libor +	(the " Margin ")
		Loai	n Number:	
	redit Access LIne (select one): Personal property (such as auto	omobile, boat, jewelry)	☐ Support of business	☐ General liquidity purposes
		3 APPLICANT INFORM	MATION	
Applicants may be natur "Applicant," "I," "me," " below.	al persons (in their individual c	apacity or as trustee), revocable ort). Certain sections of this Ap _l	e trusts, or legal entities (indi	ividually or collectively referred to herein as or certain types of Applicants, as indicated
Applicant		Appl	icant	
Individual Applicants	<u>:</u>	<u>Indivi</u>	dual Applicants:	
Name		Name		
Name		Name		
<u>Trust Applicants:</u>			Applicants:	
Name of Trust		Name	of Trust	
Name of Grantor	Name of Trust	ee Name	of Grantor	Name of Trustee
Name of Grantor	Name of Trust	ee Name	of Grantor	Name of Trustee
Name of Grantor	Name of Trust	ee Name	of Grantor	Name of Trustee
Legal Entity Applican	ts: Complete Annex I (Beneficial (Ownership Certification) Legal	Entity Applicants: Compl	ete Annex I (Beneficial Ownership Certification)
Tax Identification Numb	er	Tax Id	entification Number	
State of Organization		State	of Organization	
Entity Type		Entity	Туре	



3	A PPLICANT	Information	- CONTINUED
• • •			• • • • • • • • • • • • • • • • • • • •

Applicant	Applicant			
Applicant Name (First, MI, Last) ¹	Applicant Name (First, Ml, Last) ¹			
Principal Residence Address (Street) (PO Box Not Accepted)	Principal Residence Address (Street) (PO Box Not Accepted)			
Principal Residence Address (City, State, ZIP)	Principal Residence Address (City, State, ZIP)			
Mailing Address (Street) (If different than above)	Mailing Address (Street) (If different than above)			
Mailing Address (City, State, ZIP)	Mailing Address (City, State, ZIP)			
Provide: Home Phone Work Phone Cell Phone ²	Provide: Home Phone Work Phone Cell Phone ²			
Email Address	Email Address			
Social Security Number Date Of Birth (mm/dd/yyyy)	Social Security Number Date Of Birth (mm/dd/yyyy)			
United States Citizen³:	United States Citizen³:			
Form of Identification: Drivers License Passport (Select One) Government-Issued Photo ID	Form of Identification: (Select One) Drivers License Passport Government-Issued Photo ID			
ID# State / Country Expiration Date (mm/dd/yyyy)	ID# State / Country Expiration Date (mm/dd/yyyy)			
Annual Income: Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. Less Than \$50,000 \$50,001-\$100,000 \$100,001-\$250,000 \$250,001-\$500,000 \$500,001-\$1,000,000 \$1,000,000+ How long have you been a client of RBC? <pre></pre>	Annual Income: Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. Less Than \$50,000 \$50,001-\$100,000 \$100,001-\$250,000 \$250,001-\$500,000 \$500,001-\$1,000,000 \$1,000,000+ How long have you been a client of RBC? <<<<<< 1 to 2 years 2 to 3 years 3 to 5 years 5 years+ Please provide an estimate of your net worth: Less than \$100,000 \$100,001-\$250,000 \$250,001-\$500,000 \$500,001-\$500,000 \$500,001-\$500,000 \$500,001-\$500,000 \$500,001-\$500,000 \$500,001-\$500,000 \$500,000-\$1,000,000 \$500,000-\$1,			

^{1.} Unless the context states otherwise, the term "Applicant" includes all Applicants whether natural persons (in their individual capacity or as trustee), trusts, or legal entities. A trust is only eligible as an Applicant when: (i) it is a revocable trust, (ii) one or more of the pledged accounts is owned by the trust, and (iii) the grantor of the trust is also an Applicant. A legal entity is only eligible as an Applicant when: (i) one or more of the pledged accounts is owned by the trust, and (iii) the grantor of the trust is also an Applicant. A legal entity is only eligible as an Applicant when: (i) one or more of the pledged accounts is owned by the legal entity, and (ii) a principal of the legal entity is also an Applicant. For all other credit inquiries, please contact your RBC Wealth Management financial advisor.

2. You authorize Royal Bank of Canada ("RBC") to contact you at any phone number you provide to discuss your application. Message and data rates may apply. You may contact RBC at any time to change these preferences.

3. This form of application may only be used by United States citizens who reside in the United States. For all other credit inquiries, please contact your RBC Wealth Management financial advisor.





APPLICANT INFORMATION - CONTINUED

Source of Wealth (Please check all that apply and provide details)

Explain how you have accumulated your assets, for example: Income, savings and/or inheritance. Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Source of Wealth (Please check all that apply and provide details)

Explain how you have accumulated your assets, for example: Income, savings and/or inheritance. Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

EMPLOYMENT INFORMATION
Employed:
Business owner:
Retired:
Other:
Employed 🗌
Employer Name
Address, City, State, Zip Code
Business Website, if applicable
Position
Employment Dates (From / To)
Previous Employer(s) if less than 10 years at above Employer Business Owner □
Company Name(s)
Address, City, State, Zip Code
State/ Province and Country of Legal Formation
Year of Formation
Industry or Business Purpose
% Ownership
Role/Position
Other Owner(s), if applicable (Name and % Ownership)
Business Website, if applicable
Retired
Prior Company Name
Prior Company Address
Employment Dates (From / To)
Roles/Position Prior to Retirement
Previous Employer(s) if less than 10 years at above Employer
Other
Describe



3 Applicant Information - Continued

Investment Income Please include investments such as real estate or investment / annuity income.	Investment Income Please include investments such as real estate or investment / annuity income.			
Describe investment types	Describe investment types			
Settlement □	Settlement □			
Please include the type of settlement and year received.	Please include the type of settlement and year received.			
Type (Divorce, Settlement, Insurance Settlement, etc)	Type (Divorce, Settlement, Insurance Settlement, etc)			
Estimated value	Estimated value			
Date of Receipt (MM/YYYY)	Date of Receipt (MM/YYYY)			
Full name of Settlor	Full name of Settlor			
Relationship (Spouse, Mother/Father, Sibling, etc)	Relationship (Spouse, Mother/Father, Sibling, etc)			
How did the Settlor create their wealth	How did the Settlor create their wealth			
Gift / Inheritance	Gift / Inheritance			
Type (Gift, Inheritance, Other)	Type (Gift, Inheritance, Other)			
Estimated value	Estimated value			
Date of Receipt (MM/YYYY)	Date of Receipt (MM/YYYY)			
Full name of Benefactor	Full name of Benefactor			
Relationship (Spouse, Mother/Father, Sibling, etc)	Relationship (Spouse, Mother/Father, Sibling, etc)			
How did the Benefactor create their wealth	How did the Benefactor create their wealth			
Sale of assets Please include information on settlement of real estate or business.	Sale of assets Please include information on settlement of real estate or business.			
Description	Description			
Location	Location			
Dates	Dates			
Other (ie: Personal Savings)	Other (ie: Personal Savings)			
Describe	Describe			



3	A PPLICANT	Information

Applicant			Applicant		
Applicant Name (First, MI	. Last)¹		Applicant Name (First, MI	, Last)¹	
Principal Residence Addre	ess (Street) (PO Box N	ot Accepted)	Principal Residence Addre	ess (Street) (PO Box	Not Accepted)
Principal Residence Addre	ess (City, State, ZIP)		Principal Residence Addre	ess (City, State, ZIP)	
Mailing Address (Street) (I	f different than above	e)	Mailing Address (Street) (I	f different than abo	ove)
Mailing Address (City, Sta	te, ZIP)		Mailing Address (City, Star	te, ZIP)	
Provide: Home Phone	Work Phone	Cell Phone ²	Provide: Home Phone	Work Phone	Cell Phone ²
Email Address			Email Address		
Social Security Number		Date Of Birth (mm/dd/yyyy)	Social Security Number		Date Of Birth (mm/dd/yyyy)
United States Citizen ³ :	Yes	□ No	United States Citizen³:	☐ Yes	☐ No
Form of Identification: (Select One)	☐ Drivers Licens☐ Government-I	e Passport Issued Photo ID	Form of Identification: (Select One)	☐ Drivers Lice☐ Governmen	nse
ID# St	ate / Country E	xpiration Date (mm/dd/yyyy)	ID# St	ate / Country	Expiration Date (mm/dd/yyyy)
Annual Income: Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. Less Than \$50,000 \$50,001-\$100,000 \$100,001-\$250,000 \$250,001-\$500,000 \$500,001-\$1,000,000 \$1,000,000+ How long have you been a client of RBC?			Annual Income: Alimony, child support or separ wish to have it considered as a large Less Than \$50,000 \$\ \text{250,001-\$500,000}\$ How long have you been a	basis for repaying this o] \$50,001-\$100,00] \$500,001-\$1,000	0 \$100,001-\$250,000
			☐<1 Year ☐ 1 to 2 years ☐ 2 to 3 years ☐ 3 to 5 years ☐ 5 years+		
Please provide an estimate of your net worth:			Please provide an estimate of your net worth:		
Less than \$100,000			Less than \$100,000		

^{1.} Unless the context states otherwise, the term "Applicant" includes all Applicants whether natural persons (in their individual capacity or as trustee), trusts, or legal entities. A trust is only eligible as an Applicant when: (i) it is a revocable trust, (ii) one or more of the pledged accounts is owned by the trust, and (iii) the grantor of the trust is also an Applicant. A legal entity is only eligible as an Applicant when: (i) one or more of the pledged accounts is owned by the legal entity, and (ii) a principal of the legal entity is also an Applicant. For all other credit inquiries, please contact your RBC Wealth Management financial advisor.

2. You authorize Royal Bank of Canada ("RBC") to contact you at any phone number you provide to discuss your application. Message and data rates may apply. You may contact RBC at any time

^{3.} This form of application may only be used by United States citizens who reside in the United States. For all other credit inquiries, please contact your RBC Wealth Management financial advisor.





APPLICANT INFORMATION - CONTINUED

Source of Wealth (Please check all that apply and provide details)

Explain how you have accumulated your assets, for example: Income, savings and/or inheritance. Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Source of Wealth (Please check all that apply and provide details)

Explain how you have accumulated your assets, for example: Income, savings and/or inheritance. Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

EMPLOYMENT INFORMATION	EMPLOYMENT INFORMATION		
Employed:	Employed:		
Business owner:	Business owner:		
Retired:	Retired:		
Other:	Other:		
Employed	Employed		
Employer Name	Employer Name		
Address, City, State, Zip Code	Address, City, State, Zip Code		
Business Website, if applicable	Business Website, if applicable		
Position	Position		
Employment Dates (From / To)	Employment Dates (From / To)		
Previous Employer(s) if less than 10 years at above Employer	Previous Employer(s) if less than 10 years at above Employer		
Business Owner	Business Owner		
Company Name(s)	Company Name(s)		
Address, City, State, Zip Code	Address, City, State, Zip Code		
State/ Province and Country of Legal Formation	State/ Province and Country of Legal Formation		
Year of Formation	Year of Formation		
Industry or Business Purpose	Industry or Business Purpose		
% Ownership	% Ownership		
Role/Position	Role/Position		
Other Owner(s), if applicable (Name and % Ownership)	Other Owner(s), if applicable (Name and % Ownership)		
Business Website, if applicable	Business Website, if applicable		
Retired 🗌	Retired □		
Prior Company Name	Prior Company Name		
Prior Company Address	Prior Company Address		
Employment Dates (From / To)	Employment Dates (From / To)		
Roles/Position Prior to Retirement	Roles/Position Prior to Retirement		
Previous Employer(s) if less than 10 years at above Employer	Previous Employer(s) if less than 10 years at above Employer		
Other 🗌	Other		
Describe	Describe		



3 Applicant Information - Continued

Investment Income Please include investments such as real estate or investment / annuity income.	Investment Income Please include investments such as real estate or investment / annuity income.			
Describe investment types	Describe investment types			
Settlement	Settlement □			
Please include the type of settlement and year received.	Please include the type of settlement and year received.			
Type (Divorce, Settlement, Insurance Settlement, etc)	Type (Divorce, Settlement, Insurance Settlement, etc)			
Estimated value	Estimated value			
Date of Receipt (MM/YYYY)	Date of Receipt (MM/YYYY)			
Full name of Settlor	Full name of Settlor			
Relationship (Spouse, Mother/Father, Sibling, etc)	Relationship (Spouse, Mother/Father, Sibling, etc)			
How did the Settlor create their wealth	How did the Settlor create their wealth			
Gift / Inheritance	Gift / Inheritance			
Type (Gift, Inheritance, Other)	Type (Gift, Inheritance, Other)			
Estimated value	Estimated value			
Date of Receipt (MM/YYYY)	Date of Receipt (MM/YYYY)			
Full name of Benefactor	Full name of Benefactor			
Relationship (Spouse, Mother/Father, Sibling, etc)	Relationship (Spouse, Mother/Father, Sibling, etc)			
How did the Benefactor create their wealth	How did the Benefactor create their wealth			
Sale of assets Please include information on settlement of real estate or business.	Sale of assets ☐ Please include information on settlement of real estate or business.			
Description	Description			
Location	Location			
Dates	Dates			
Other (ie: Personal Savings)	Other (ie: Personal Savings)			
Dascriba	Daccriha			



3	A PP	LICANT	Information	
• • •	 	• • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	

Applicant			Applicant		
Applicant Name (First, MI, L	.ast)¹		Applicant Name (First, MI,	Last) ¹	
Principal Residence Address	s (Street) (PO Bo	x Not Accepted)	Principal Residence Addre	ss (Street) (PO Bo	x Not Accepted)
Principal Residence Address	s (City, State, ZIP)	Principal Residence Addre	ss (City, State, ZIP))
Mailing Address (Street) (If o	different than ab	oove)	Mailing Address (Street) (If	different than ab	oove)
Mailing Address (City, State	, ZIP)		Mailing Address (City, Stat	e, ZIP)	
Provide: Home Phone	Work Phone	Cell Phone ²	Provide: Home Phone	Work Phone	Cell Phone ²
Email Address			Email Address		
Social Security Number		Date Of Birth (mm/dd/yyyy)	Social Security Number		Date Of Birth (mm/dd/yyyy)
United States Citizen ³ :	Yes	□ No	United States Citizen³:	☐ Yes	☐ No
Form of Identification: (Select One)	☐ Drivers Lice	ense	Form of Identification: (Select One)	☐ Drivers Lice☐ Governme	ense
ID# Stat	te / Country	Expiration Date (mm/dd/yyyy)	ID# St	ate / Country	Expiration Date (mm/dd/yyyy)
Annual Income: Alimony, child support or separat wish to have it considered as a ba Less Than \$50,000 S \$250,001-\$500,000 S How long have you been a c	sis for repaying this \$50,001-\$100,0 \$500,001-\$1,00 client of RBC?	00	Annual Income: Alimony, child support or separa wish to have it considered as a bar less Than \$50,000 \$\text{\$\exitit{\$\text{\$\text{\$\text{\$\}\$\text{\$\text{\$\text{\$\te	asis for repaying this \$50,001-\$100,0 \$500,001-\$1,00 client of RBC?	00
Please provide an estimate of	-		Please provide an estimate	-	
Less than \$100,000				\$100,001-\$25	0,000

^{1.} Unless the context states otherwise, the term "Applicant" includes all Applicants whether natural persons (in their individual capacity or as trustee), trusts, or legal entities. A trust is only eligible as an Applicant when: (i) it is a revocable trust, (ii) one or more of the pledged accounts is owned by the trust, and (iii) the grantor of the trust is also an Applicant. A legal entity is only eligible as an Applicant when: (i) one or more of the pledged accounts is owned by the legal entity, and (ii) a principal of the legal entity is also an Applicant. For all other credit inquiries, please contact your RBC Wealth Management financial advisor.
You authorize Royal Bank of Canada ("RBC") to contact you at any phone number you provide to discuss your application. Message and data rates may apply. You may contact RBC at any time

^{3.} This form of application may only be used by United States citizens who reside in the United States. For all other credit inquiries, please contact your RBC Wealth Management financial advisor.





APPLICANT INFORMATION - CONTINUED

Source of Wealth (*Please check all that apply and provide details*)

Explain how you have accumulated your assets, for example: Income, savings and/or inheritance. Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Source of Wealth (Please check all that apply and provide details)

Explain how you have accumulated your assets, for example: Income, savings and/or inheritance. Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

EMPLOYMENT INFORMATION	EMPLOYMENT INFORMATION
Employed:	Employed:
Business owner:	Business owner:
Retired:	Retired:
Other:	Other:
Employed 🗌	Employed 🗌
Employer Name	Employer Name
Address, City, State, Zip Code	Address, City, State, Zip Code
Business Website, if applicable	Business Website, if applicable
Position	Position
Employment Dates (From / To)	Employment Dates (From / To)
Previous Employer(s) if less than 10 years at above Employer	Previous Employer(s) if less than 10 years at above Employer
Business Owner	Business Owner
Company Name(s)	Company Name(s)
Address, City, State, Zip Code	Address, City, State, Zip Code
State/ Province and Country of Legal Formation	State/ Province and Country of Legal Formation
Year of Formation	Year of Formation
Industry or Business Purpose	Industry or Business Purpose
% Ownership	% Ownership
Role/Position	Role/Position
Other Owner(s), if applicable (Name and % Ownership)	Other Owner(s), if applicable (Name and % Ownership)
Business Website, if applicable	Business Website, if applicable
Retired 🗌	Retired
Prior Company Name	Prior Company Name
Prior Company Address	Prior Company Address
Employment Dates (From / To)	Employment Dates (From / To)
Roles/Position Prior to Retirement	Roles/Position Prior to Retirement
Previous Employer(s) if less than 10 years at above Employer	Previous Employer(s) if less than 10 years at above Employer
Other 🗌	Other
Describe	Describe



3 Applicant Information - Continued

Investment Income Please include investments such as real estate or investment / annuity income.	Investment Income Please include investments such as real estate or investment / annuity income.			
Describe investment types	Describe investment types			
Settlement	Settlement			
Please include the type of settlement and year received.	Please include the type of settlement and year received.			
Type (Divorce, Settlement, Insurance Settlement, etc)	Type (Divorce, Settlement, Insurance Settlement, etc)			
Estimated value	Estimated value			
Date of Receipt (MM/YYYY)	Date of Receipt (MM/YYYY)			
Full name of Settlor	Full name of Settlor			
Relationship (Spouse, Mother/Father, Sibling, etc)	Relationship (Spouse, Mother/Father, Sibling, etc)			
How did the Settlor create their wealth	How did the Settlor create their wealth			
Gift / Inheritance	Gift / Inheritance			
Type (Gift, Inheritance, Other)	Type (Gift, Inheritance, Other)			
Estimated value	Estimated value			
Date of Receipt (MM/YYYY)	Date of Receipt (MM/YYYY)			
Full name of Benefactor	Full name of Benefactor			
Relationship (Spouse, Mother/Father, Sibling, etc)	Relationship (Spouse, Mother/Father, Sibling, etc)			
How did the Benefactor create their wealth	How did the Benefactor create their wealth			
Sale of assets Please include information on settlement of real estate or business.	Sale of assets ☐ Please include information on settlement of real estate or business.			
Description	Description			
Location	Location			
Dates	Dates			
Other (ie: Personal Savings)	Other (ie: Personal Savings) 🗌			
Describe	Describe			



4

INSTRUCTIONS TO RECEIVE LINE OF CREDIT DISBURSEMENTS

Designate the checking account into which you want your Line of Credit disbursements to be deposited. Disbursements will be made by Automated Clearing House ("ACH"). Please be sure to use the routing number your financial institution specifies for electronic payment or ACH transactions. You may change your designated deposit account at any time by submitting a request to the NY Branch Credit Administration at ploccreditadmin@rbc.com. Any change to your designated deposit account for disbursements will take effect within five (5) business days.

Bank Name	Routing ABA #	
Account Name	Account Number	
Note: The account name at your financia	institution must match the Applicant's name in this Application.	
	5 Collateral Information	
The following accounts will be pledged as	collateral for your line of credit.	
Account Number	Account Title	
	6 SUPPLEMENTAL INFORMATION CHECKLIST	
MONEY LAUNDERING ACTIVITIES, FEDER EACH PERSON WHO OPENS AN ACCOUNT	EDURES FOR OPENING A NEW ACCOUNT — TO HELP THE GOVERNMENT FIGHT THE FUNDING OF TERROF AL LAW REQUIRES ALL FINANCIAL INSTITUTIONS TO OBTAIN, VERIFY, AND RECORD INFORMATION THAT I T. WHAT THIS MEANS FOR YOU: WHEN YOU OPEN AN ACCOUNT, RBC WILL ASK FOR YOUR NAME, ADDR R INFORMATION THAT WILL ALLOW RBC TO IDENTIFY YOU. RBC MAY ALSO ASK TO SEE YOUR DRIVER'S G DOCUMENTS.	IDENTIFIES RESS, DATE
For all Applicants:		
\square If paying off an existing securities base	l loan, provide a copy of the loan statement and ACAT Form to your RBC Wealth Management financial ac	dvisor
For Applicants that are legal entities:		
☐ Completed Beneficial Ownership Certif	cation Form (Annex I)	
For Applicants that are revocable trust \square Completed Certification of Trust		





ACKNOWLEDGMENT AND REQUEST TO ORDER CREDIT REPORT

By signing below, I hereby apply for a line of credit and consent and agree to all of the terms and conditions contained in this Application. This Application is provided to RBC by the Applicant(s) for review of my creditworthiness for a line of credit from RBC, which will be secured by the collateral account(s) designated herein, and RBC can rely on its contents. I hereby represent and warrant to RBC that this Application is complete and correct as of the date of my signature and that I will promptly inform RBC of any material changes in the information provided. I authorize RBC to verify the information in my Application and I agree that RBC may contact third parties to verify any such information.

I agree that you may obtain credit reports on me from time to time, at your sole discretion and expense, for any reason (including, but not limited to, determining whether there has been an adverse change in my financial position). If I have supplied my social security number (SSN) in connection with this Application to you, you may treat my SSN as an integral part of that information and maintain it in your records about me. You may likewise use my SSN and communicate it and allow it to be communicated to other persons and agencies as an aid to identifying me.

I authorize RBC to share information regarding this Application and any underwriting decision in connection with my Application with my RBC Wealth Management financial advisor.

Do I Have Freeze On My C	redit Report?			
	Yes No	Yes No		Yes No
	Yes No	☐ Yes ☐ No		
Please sign here:				
Name	Signature	Title	Date	
Name	Signature	Title	Date	
Name	Signature	Title	Date	
Name	Signature	Title	Date	
Name	Signature	Title	Date	
	8 ST.	ATE DISCLOSURE		

Important information about procedures for opening a new account. To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means for you: When you open an account, RBC will ask for your name, address, date of birth (for individuals) and other information that will allow RBC to identify you. RBC may also ask to see your driver's license (for individuals) or other identifying documents.

California Residents: Married Applicants may apply for a separate account.

Ohio Residents: The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

Wisconsin Residents: For married Wisconsin residents, by submitting your application you are confirming that this loan (if granted) is being incurred in the interest of your marriage and your family. No provision of a marital property agreement, unilateral statement under §776.59 of the Wisconsin Statutes or court order under §776.70 of the Wisconsin Statutes adversely affects the interests of a lender unless the lender, prior to the time the credit is granted, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision when the obligation to the lender is incurred. If the loan for which you are applying is granted, you will notify the lender if you have a spouse who needs to receive notification that credit has been extended to you.



Notice of Financial and Legal Representation

If this Application is approved, RBC may require each of the Applicants signing below to make certain representations as to their current financial and legal status as well as with respect to other matters.

Each Applicant below further acknowledges and confirms that:

- 1. It has read and understands this Application.
- 2. All obligations relating to the line of credit (if granted) shall become due and payable immediately upon RBC's demand. RBC may demand payment at any time of all or any part of the obligations, and upon demand and without prior notice, RBC may exercise its rights and remedies in connection therewith.
- 3. All information contained in or submitted in connection with this Application is true, accurate and complete as of the date such signatory executes this Application and such signatory agrees to immediately notify RBC in writing of any changes to such information.

If this Application is being signed by any party with electronic signatures, then such party hereby agrees that (i) such electronic signatures are effective and such party will not dispute the legally binding nature, validity or enforceability of this Application based on the fact that the terms were accepted with an electronic signature, and (ii) this electronically signed Application may be retained electronically by RBC as the original record thereof, and may be admitted into evidence in any proceeding concerning the Application. RBC agrees to comply with all applicable federal and state electronic records and signatures laws, including but not limited to the Electronic Signatures in Global and National Commerce Act. RBC may, in its sole discretion, decline to accept, or request further verification of, any attempted electronic signature but shall be entitled to rely on such electronic signature without further verification.

Each Applicant signing below hereby directs its RBC Wealth Management financial advisor to deliver all other documents requested by RBC for the line of credit and acknowledge and confirm all of the foregoing.



se sign here:			
Individual Applicants			
		Date	
		Date	
		Date	
		Date	
		Date	
		Date	
Trust Applicants			
	D-1-		Data
	Date		Date
	Date		
Legal Entity Applicants			
<u> Legar Entity Applicants</u>			
Company Name	Signature	Nama	Title
сопрапу маше	signature	Name	itte
Company Name	Signature	Name	Title
Company Name	Signature	Name	Title
- OTTI PATTY INVITE	Jigilature	INGILIC	TILL



Annex I

BENEFICIAL OWNERSHIP CERTIFICATION FORM

I. GENERAL INSTRUCTIONS

What is this form?

To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

Who has to complete this form?

This form must be completed by the person opening a new account on behalf of a legal entity with any of the following U.S. financial institutions: (i) a bank or credit union; (ii) a broker or dealer in securities; (iii) a mutual fund; (iv) a futures commission merchant; or (v) an introducing broker in commodities.

For the purposes of this form, a **legal entity** includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. **Legal entity** does not include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

What information do I have to provide?

This form requires you to provide the name, address, date of birth and Social Security number (or passport number or other similar information, in the case of foreign persons) for the following individuals (*i.e.*, the **beneficial owners**):

- (i) Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation); **and**
- (ii) An individual with significant responsibility for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer). The number of individuals that satisfy this definition of "beneficial owner" may vary. Under section (i), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (i), you must provide the identifying information of one individual under section (ii). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30% equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii) and four 25 percent equity holders under section (i)).

The financial institution may also ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this form.

II. CERTIFICATION OF BENEFICIAL OWNER(S)

Th.	•	1 1 10 0 1	1 1.1	• 1 41 6	11 ' ' C '
Percone one	aning an account c	n hehalt at a lea	al entity muct	nrovide the to	ollowing information:
I CI SUIIS UDG	omne an account c	m bunan di a ice	ai chuty must	provide the re	JIIUWIIIZ IIIIUI IIIAUUII

a. Name and Title of Natural Person Opening Account:					
b. Name and Address of Legal Entity for Which the Account is Being Opened:					

c. The following information for <u>each</u> individual, if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 25 percent or more of the equity interests of the legal entity listed above:



Name	Date of Birth	Percenta; Owner		Address (Residen or Business Stre Address)		For U.S. Persons: Social Security Number	For Foreign Persons: Passport Number and Country of Issuance, or other similar identification number ¹
				`			e write "Not Applicable."
d. The follow	ing information for <u>or</u>	<u>ne</u> individual	with sig	nificant responsibil	lity for	managing the legal e	ntity listed above, such as
	n executive officer or er, Managing Membe					Chief Financial Offic Treasurer); or	er, Chief Operating
	ny other individual wi	no regularly	perform	s similar functions.			
(If ap	ppropriate, an individu	ıal listed und	ler sectio	on (c) above may als	so be l	isted in this section (d	l)).
							For Foreign Persons:
Name	Date of	Birth		ess (Residential or ss Street Address)		For U.S. Persons:	Passport Number and Country of Issuance, or other similar identification number ¹
			•				
I,		(name oj	f natural	person opening ac	count), hereby certify, to t	he best of my knowledge
that the informatio	n provided above is	complete ar	id corre	ct.			
Signature:				Date:			
¹ In lieu of a passpoissuance of any of safeguard.	ort number, foreign her government-issu	persons may ed documer	y also p nt evide	rovide an alien ide neing nationality	entifica or res	ation card number, of idence and bearing	or number and country o a photograph or simila

Legal Entity Identifier _____(Optional)