



CIRO · OCRI

Canadian Investment
Regulatory
Organization

Organisme canadien
de réglementation
des investissements

Membership Application

Version Date: June 1, 2023

GENERAL INSTRUCTIONS

- This Membership Application is intended for corporations or partnerships seeking admission to membership in the Canadian Investment Regulatory Organization (CIRO).
- Please complete this Membership Application in full. Enter the requested details in the space provided. If there is insufficient space, provide the requested details in a separate attachment and label it with the relevant question number (e.g., Attachment B1).
- The completed Membership Application, Certificate and Agreement, and Statutory Declaration form the Application for Dealer Membership (“the Application”). The Application must be submitted in its entirety and must be accompanied by any supporting documents requested in the Application. Applications that are incomplete or are missing the required supporting documentation may not be accepted for review and/or may experience processing delays.
- Refer to the Documentation Checklist at the end of the Membership Application for a list of supporting documents that must be submitted with the completed Application.
- All signatures on the Application must be original.
- For *Section O Offences under the Law*, disclosure is not required for any offence for which a pardon has been granted under the Criminal Records Act (Canada) and such pardon has not been revoked. Under such circumstances, the appropriate response is “No.” If there is any question as to the appropriate response to any question in the Application, the applicant should consult with their legal adviser.
- Firms are encouraged to contact CIRO staff at membershipcoordinator@ciro.ca to discuss the details of their Application to become a new member before submitting their Application. This will facilitate an efficient application and review process.
- For eligibility, fees, and other requirements for membership, refer to the following:
 - Guidance on *Becoming a Dealer Member* available on CIRO’s website.
 - The Investment Dealer and Partially Consolidated Rules or the Mutual Fund Dealer Rules, as applicable.
 - The IIROC Fee Model Guidelines or the MFDA Membership Fees, as applicable.

Membership Application

Type of Applicant (Descriptions):

- **Dual** = The firm is applying for membership as both an Investment Dealer and a Mutual Fund Dealer.
- **ID** = The firm is applying for membership as an Investment Dealer only.
- **MFD** = The firm is applying for membership as a Mutual Fund Dealer only.

Required Information		Type of Applicant		
Complete the questions for the applicable Type of Applicant		Dual	ID	MFD
A	GENERAL INFORMATION			
A1	Applicant Name			
	A1.1. Provide the legal name of the applicant. <input style="width: 100%; height: 20px;" type="text"/>	Yes	Yes	Yes
	A1.2. Provide the name(s) under which the applicant will carry on business, including trade names to be used in conjunction with the applicant's legal name. <input style="width: 100%; height: 20px;" type="text"/>	Yes	Yes	Yes
	A1.3. Provide the former name(s) of the applicant, if applicable and provide a copy of the Articles of Amendment evidencing the change(s) in legal name. <input style="width: 100%; height: 20px;" type="text"/>	Yes	Yes	Yes
A2	Category of Registration and Jurisdiction			
	A2.1. What category(ies) of registration is the firm applying for? <input type="checkbox"/> Investment Dealer and Mutual Fund Dealer (dual registration) <input type="checkbox"/> Investment Dealer only <input type="checkbox"/> Mutual Fund Dealer only <i>Ensure that the required CSA registration forms have been completed and submitted to the appropriate regulator. Include copies of the completed Form 33-109F6 Firm Registration and Form 33-109F4 Registration of Individuals and Review of Permitted Individuals with the firm's Membership Application.</i>	Yes	Yes	Yes
	A2.2. List the province(s) and/or territory(ies) in which the applicant wishes to conduct business. <input style="width: 100%; height: 20px;" type="text"/>	Yes	Yes	Yes
	A2.3. Will the applicant conduct Mutual Fund Dealer business in Quebec? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If 'Yes,' proceed to A2.3.1. If 'No,' proceed to A3.)</i> A2.3.1. Regarding the applicant's Mutual Fund Dealer business in Quebec, does the applicant plan on applying for exemptive relief from either of the following? A2.3.1.1. Exemptive relief from the applicable requirements of Regulation 31-103. <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If 'Yes,' please provide full details.)</i> <input style="width: 100%; height: 20px;" type="text"/> A2.3.1.2. Exemptive relief from the applicable requirements of the Mutual Fund Dealer Rules. <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If 'Yes,' please provide full details.)</i> <input style="width: 100%; height: 20px;" type="text"/>	Yes		Yes
A3	Key Contact Person			
	A3.1. Provide the name, telephone number and email address of the individual to contact regarding this application (i.e., key contact person). <input style="width: 100%; height: 20px;" type="text"/>	Yes	Yes	Yes

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
		Dual	ID	MFD
B	LEGAL STATUS AND OWNERSHIP STRUCTURE			
B1	Legal Status of Applicant			
	B1.1. Indicate the legal status of the applicant: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership	Yes	Yes	Yes
	B1.2. Provide the date of incorporation and governing statute. <input type="text"/>	Yes	Yes	Yes
	B1.3. Provide the jurisdiction of incorporation and governing statute. <input type="text"/>	Yes	Yes	Yes
	B1.4. Attach the Articles of Incorporation or other documents evidencing formation.	Yes	Yes	Yes
B2	For Corporations (only applicable if selected "Corporation" for B1.1)			
	B2.1. Capitalization Describe the applicant's capitalization (classes of shares and other securities, number authorized, number issued and outstanding, and their dollar value). <input type="text"/>	Yes	Yes	Yes
	B2.2. Subordinated Debt Describe the applicant's subordinated debt (amounts authorized or advanced, terms, holders) and attach the Subordinated Loan Agreements (for Investment Dealers) or the completed MFDA Uniform Subordinated Loan Agreements (for Mutual Fund Dealers). <input type="text"/>	Yes	Yes	Yes
	B2.3. Subordinated Debt Secured by Creditor Is the applicant's subordinated debt secured by the Creditor? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If 'Yes,' attach the Override Acknowledgement for MFDA Uniform Subordinated Loan Agreement.</i>			Yes
	B2.4. Distribution of Applicant's Securities Have the applicant's securities been distributed to the public by prospectus or equivalent document? <input type="checkbox"/> Yes <input type="checkbox"/> No	Yes	Yes	
	B2.5. Interest in the Applicant's Capital Are there any persons, firms or corporations that have an interest either directly or indirectly in the applicant's capital whether by way of loan, guarantee, ownership of securities or otherwise? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If 'Yes,' proceed to B2.5.1. If 'No,' proceed to B2.6.)</i> B2.5.1. Do any of these persons, firms or corporations hold directly or indirectly 10% or more of the applicant's voting or participating securities or total equity? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If 'Yes,' attach a completed Investor Application Form for each applicable investor.)</i> B2.5.2. Do any of these persons, firms or corporations hold directly or indirectly less than 10% of the applicant's voting or participating securities or total equity? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If 'Yes,' attach a completed Investor Notification Form for each applicable investor.)</i>	Yes	Yes	
	B2.6. Significant Equity Interest Indicate all persons, alone or together with associates or affiliates, having a significant equity interest in the applicant as set out in Section 8.4 of the Mutual Fund Dealer Rules. <input type="text"/>			Yes

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
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B3	For Partnerships (only applicable if selected 'Partnership' for B1.1)			
	B3.1. Indicate the type of partnership (select one): <input type="checkbox"/> General <input type="checkbox"/> Limited	Yes	Yes	Yes
	B3.2. Provide the full names of all partners and describe the partnership interest for each of them. <div style="border: 1px solid black; height: 60px; width: 100%;"></div>	Yes	Yes	Yes
B4	Ownership Chart			
	B4.1. Attach a chart showing the firm's structure and ownership, including the percentage held. Include all associates, affiliates, and related parties of the applicant.	Yes	Yes	Yes
	B4.2. Provide the names of all associates and affiliates of the applicant and the nature of their business. <div style="border: 1px solid black; height: 60px; width: 100%;"></div>	Yes	Yes	Yes
	B4.3. Identify any associate or affiliate of the applicant that is a "related company" under Section 1200 of the Investment Dealer and Partially Consolidated Rules or is a "related Member" under the Mutual Fund Dealer Rules. <div style="border: 1px solid black; height: 60px; width: 100%;"></div>	Yes	Yes	Yes
B5	Guarantors			
	B5.1. Are there any persons or companies acting as guarantors in relation to the financial or other undertakings of the applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If 'Yes,' please provide full details.)</i> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>	Yes	Yes	Yes
	B5.2. Are there any persons or companies for which the applicant has undertaken to act as guarantor with respect to financial or other undertakings? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If 'Yes,' please provide full details.)</i> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>	Yes	Yes	Yes
C	DIRECTORS, OFFICERS, EXECUTIVES AND OTHER REGISTRANTS			
C1	List of Directors, Officers and Executives Provide a list of the applicant's Directors, Officers and Executives, including the Ultimate Designated Person (UDP), Chief Compliance Officer (CCO) and Chief Financial Officer (CFO) and provide the following details for each listed individual: <ul style="list-style-type: none"> ▪ full name and business title ▪ NRD number <i>(if currently registered)</i> ▪ phone number and email address <i>(only required for the UDP, CCO and CFO)</i> ▪ a description of how the individual meets the proficiency and experience requirements for their requested registration category ▪ a description of how the individual meets the general requirements for Directors or Executives, as applicable, in accordance with Sections 2502 and 2503 of the Investment Dealer and Partially Consolidated Rules, where applicable. 	Yes	Yes	Yes

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
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C2	<p>Chief Compliance Officer (CCO) and Ultimate Designated Person (UDP)</p> <p>Does the applicant intend to have separate CCOs and/or UDPs for its Investment Dealer business and Mutual Fund Dealer business?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <p><i>Note: Applicants should consult with the securities regulatory in their principal jurisdiction on how to apply for exemptive relief from the applicable requirements of National Instrument 31-103 regarding designating an individual as the UDP and/or CCO.</i></p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes		
C3	<p>Significant Areas of Risk and Responsible Executive(s)</p> <p>Provide a list of the applicant's significant areas of risk and the Executive(s) responsible for managing that area of risk, as described in Sections 1501 and 1502 of the Investment Dealer and Partially Consolidated Rules.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	
C4	<p>Individual Registrants</p> <p>Provide the full names of individuals whose application have or will be submitted via NRD, including dealing representatives, supervisory personnel, Partners, Directors, Officers and Executives.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes
C5	<p>Approved Person Agreement</p> <p>Has the applicant received a signed agreement from each of its Approved Persons, as referenced in Sections 1.1.4 and 1.1.5 of the Mutual Fund Dealer Rules?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'No,' please explain.)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			Yes
C6	<p>Approved Person Trade Name or Business Name</p> <p>Will any of the applicant's Approved Persons for the firm's Mutual Fund Dealer business use a trade name or business name other than the applicant's name?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If 'Yes,' attach a completed "Trade Names of Approved Persons" document providing details regarding the intended use of a business name or trade name by Approved Persons.</i></p>	Yes		Yes
D	BUSINESS OPERATIONS			
D1	<p>Date Commenced Business</p> <p>Provide the date that the applicant commenced business.</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Yes	Yes	Yes
D2	<p>Corporate Organizational Chart</p> <p>Provide a corporate organizational chart showing the applicant's internal structure, detailing the roles, responsibilities, and relationships between individuals and departments within the firm.</p>	Yes	Yes	Yes

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
		Dual	ID	MFD
D3	<p>Business Plan</p> <p>Provide the applicant's five-year business plan, which must include but is not limited to the following:</p> <ul style="list-style-type: none"> ▪ a description of the applicant, its ownership structure, and management team ▪ the type of business activities the applicant plans to engage in ▪ the nature of the products and services to be offered ▪ a description of the intended customers ▪ the applicant's target launch date ▪ the strategy to build the business, including the customer-base and dealing representatives (if applicable) ▪ 5 years of financial projections and their underlying assumptions, including: (i) statistics relating to sales volumes, sales force and finances; (ii) detailed monthly profit and loss projections for the first twelve months; and (iii) monthly risk adjusted capital calculation and early warning estimate for the first twelve months (if applicable) 	Yes	Yes	Yes
D4	<p>Head Office Location(s)</p> <p>Provide the full address, telephone number, fax number and website address for the applicant's head office location(s).</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes
D5	<p>Full-Time Personnel</p> <p>Provide the number of full-time personnel, including partners, directors, officers (Executives), supervisors or branch managers.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes
D6	<p>Business Locations</p> <p>Using the "List of Business Locations" template, provide the following information for each business location of the applicant:</p> <ol style="list-style-type: none"> a) Complete address b) Phone number and fax number c) The names of the Approved Persons at the business location and the category of registration for each of those individuals (includes trading Executives and dealing representatives) d) The name of the Supervisor or designated Branch Manager, as applicable, for the business location, and whether that individual is situated onsite at the business location. <p><i>Note: Please refer to NI 33-109 Registration Information for the definition of "business location" and IIROC Guidance Note GN-2800-21-002 for additional guidance.</i></p>	Yes	Yes	Yes
D7	<p>Investment Dealer Business</p> <p>D7.1. Principal Investment Dealer Business</p> <p>Indicate the principal Investment Dealer business of the applicant (select all that apply).</p> <p> <input type="checkbox"/> Carrying Broker <input type="checkbox"/> Corporate Finance <input type="checkbox"/> Institutional <input type="checkbox"/> Managed Accounts <input type="checkbox"/> Order Execution Only <input type="checkbox"/> Research <input type="checkbox"/> Retail – Advisory <input type="checkbox"/> Proprietary Trading / Market Making <input type="checkbox"/> Facilitation Trading (e.g., ATS Debt, ATS Equity, Direct Electronic Access) <input type="checkbox"/> Financing (e.g., call loans, securities borrowing and lending) <input type="checkbox"/> Other (Describe below) </p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	

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	<p>D7.2. Participating Organization</p> <p>Will the applicant be a participating organization ("PO") in that it will become:</p> <ul style="list-style-type: none"> ▪ a member of an Exchange ▪ a user of a recognized quotation and trade reporting system ("QTRS"), or ▪ a subscriber of an Alternative Trading System ("ATS")? <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' proceed to D7.2.1. If 'No,' proceed to D8.)</p> <p>D7.2.1. Please provide the following documentation to support the applicant's proposal to become a participating organization:</p> <p>D7.2.1.1. A detailed description of the trading activities/strategies, security types, client base, agency or proprietary, etc.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div> <p>D7.2.1.2. Trade flow diagram, from order entry to execution on a marketplace.</p> <p>D7.2.1.3. Policies and procedures to address Universal Market Integrity Rules (UMIR) requirements, as applicable.</p>	Yes	Yes	
D8	Products and Services			
	<p>D8.1. Investment Dealer Products & Services</p> <p>What products or services will the applicant trade, deal in or offer through its Investment Dealer business? (Select all that apply.)</p> <p><input type="checkbox"/> Equities <input type="checkbox"/> Exchange traded funds (ETFs) <input type="checkbox"/> Exempt market products</p> <p><input type="checkbox"/> Financial Planning <input type="checkbox"/> Fixed Income <input type="checkbox"/> Mutual Funds</p> <p><input type="checkbox"/> OTC Derivatives (e.g., CFDs) <input type="checkbox"/> Digital assets (e.g., crypto contracts)</p> <p><input type="checkbox"/> Listed Derivatives (e.g., options, futures)</p> <p><input type="checkbox"/> Other (Describe below)</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>	Yes	Yes	
	<p>D8.2. Crypto Assets</p> <p>Will the applicant's business model include offering crypto assets to clients?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' proceed to D8.2.1. If 'No,' proceed to D8.3.)</p> <p>D8.2.1. Crypto Firms - Diagram of Counterparties and Interactions</p> <p>Please provide a high-level diagram of the applicant's counterparties, their interactions, and the flow of data within the applicant's crypto asset trading model. Ensure the data flow diagram contains explanations of all the components within the diagram and includes the following information:</p> <ul style="list-style-type: none"> ▪ identities of all parties involved (e.g., the applicant, clients, custodian(s), liquidity providers, the applicant's bank) ▪ the interactions, relationships, and the role of the parties involved in the applicant's crypto asset trading model ▪ the applicant's system(s) of books and records system, and the entity that owns or is licensed to use the system(s) ▪ the timing of the transaction process <p>D8.2.2. Crypto Firms - Detailed Diagrams of Client Transactions</p> <p>Please provide detailed diagrams and descriptions of the processes for each of the following types of client transactions:</p> <ul style="list-style-type: none"> ▪ a buy trade and a sell trade ▪ a fiat deposit and a fiat disbursement ▪ a crypto asset deposit (if permitted) and a crypto asset disbursement (if permitted) 	Yes	Yes	

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	<p>D8.3. Mutual Fund Dealer Products & Services</p> <p>What products or services will the applicant trade, deal in or offer through its Mutual Fund Dealer business? (Select all that apply.)</p> <p><input type="checkbox"/> Exchange traded funds (ETFs) <input type="checkbox"/> Financial Planning <input type="checkbox"/> Limited Partnerships</p> <p><input type="checkbox"/> Mutual Funds <input type="checkbox"/> Any exempt market products not already listed</p> <p><input type="checkbox"/> Segregated Funds <input type="checkbox"/> GICs or other deposit instruments</p> <p><input type="checkbox"/> Hedge Funds or Alternative Mutual Funds</p> <p><input type="checkbox"/> Labour Sponsored Investment Funds</p> <p><input type="checkbox"/> Other (Describe below)</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>	Yes		Yes
	<p>D8.4. Transfer-in of Assets</p> <p>Does the applicant anticipate the transfer-in of existing client assets for its Mutual Fund Dealer business, once approved for membership?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details, then proceed to D8.4.1. If 'No,' proceed to D8.5.)</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div> <p>D8.4.1. Hedge Funds, Alternative Mutual Funds, Limited Partnerships</p> <p>Provide the approximate total assets under administration of the hedge funds, alternative mutual funds, limited partnerships, or other exempt market products that the applicant anticipates will be transferred-in for its Mutual Fund Dealer business.</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>	Yes		Yes
	<p>D8.5. Other Business</p> <p>Will the applicant engage in any business other than the sale of investment products and services?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>	Yes	Yes	Yes
D9	<p>Business Continuity Plan</p> <p>Provide a copy of the applicant's Business Continuity Plan (BCP). For non-Introducing Brokers/Dealers, please provide a copy of a BCP comfort letter from an approved Third-Party Reviewer.</p>	Yes	Yes	Yes
D10	<p>Shared Premises</p> <p>Will the applicant share premises with another financial services entity?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>	Yes	Yes	Yes
E	CLIENT ONBOARDING, ACCOUNT DOCUMENTS AND DISCLOSURES			
E1	Client Account Opening Documents			
	<p>E1.1. Client Account Opening Documents</p> <p>Provide samples of the applicant's client account opening documents, which include but may not be limited to the following:</p> <ul style="list-style-type: none"> ▪ New Account Application Forms (NAAFs) 	Yes		

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
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	<ul style="list-style-type: none"> Know-Your-Client (KYC) Forms, if the NAAF does not include KYC information Client Account Agreements, including any liability waivers <p>For each document provided, please identify whether it will be used for the applicant's Investment Dealer business, its Mutual Fund Dealer business, or both.</p>			
	<p>E1.2. Client Account Opening Documents</p> <p>Provide samples of the applicant's client account opening documents, which include but may not be limited to the following:</p> <ul style="list-style-type: none"> New Account Application Forms (NAAFs) Know-Your-Client (KYC) Form, if the NAAF does not include KYC information Client Account Agreements, including any liability waivers 		Yes	Yes
	<p>E1.3. Online Account Opening Process</p> <p>Will the applicant provide the ability for clients to open accounts online?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If 'Yes,' please describe the process in detail and provide supporting documentation that shows the account opening process, such as screenshots, KYC questionnaires, or other documentation showing the information collected from clients.</i></p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div>	Yes	Yes	Yes
E2	Client Disclosures			
	<p>E2.1. Client Disclosures</p> <p>Provide samples of the applicant's client disclosures, which include but may not be limited to the following:</p> <ul style="list-style-type: none"> relationship disclosure information conflict of interest disclosures leverage risk disclosure disclosure of best execution policies options disclosure statement futures disclosure statement dual occupation disclosure for dually employed Approved Persons disclosure to clients with respect to Introducing/Carrying Broker or Dealer relationship, if applicable 	Yes	Yes	
	<p>E2.2. Client Disclosures</p> <p>Provide samples of the applicant's client disclosures, which include but may not be limited to the following:</p> <ul style="list-style-type: none"> relationship disclosure information conflict of interest disclosures Risk of Leveraging disclosure document dual occupation disclosure for dually employed Approved Persons disclosure to clients with respect to Introducing/Carrying Dealer relationship, if applicable 			Yes
F	CLIENT REPORTING			
F1	<p>Provide samples of the following client reporting:</p> <p>F1.1. client account statements</p> <p>F1.2. trade confirmations</p> <p>F1.3. annual report on charges and other compensation</p> <p>F1.4. annual performance report</p>	Yes	Yes	Yes

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
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G	INTEGRATION PLAN			
G1	<p>Organization of Investment Dealer and Mutual Fund Dealer Business</p> <p>Describe in detail the applicant's plans to organize its operations as a dual registered dealer. Include whether the applicant will take:</p> <p>(a) a "full integration" approach where the firm's mutual fund business will be fully incorporated into the firm's Investment Dealer operations and the firm will follow the Investment Dealer and Partially Consolidated Rules (except where there is a Mutual Fund Dealer Rule and there is no corresponding requirement in the Investment Dealer and Partially Consolidated Rules); or</p> <p>(b) a "divisional" approach where the firm will operate its Investment Dealer business and its Mutual Fund Dealer business as separate divisions within the single legal entity.</p> <p>Consider the following areas of the firm's business and operations:</p> <ul style="list-style-type: none"> ▪ The applicant's corporate governance document that sets out the organizational structure and reporting relationships (i.e., the firm's chain of senior management, supervisory accountability and responsibilities). ▪ Client account opening processes and documents. ▪ Advisor KYC, KYP and suitability requirements. ▪ Business activities (e.g., products and services offered). ▪ The firm's system(s) of books and records. ▪ Client reporting (e.g., account statements, trade confirmations, annual performance reports). ▪ Regulatory reporting and/or financial reporting. ▪ Back-office operations (e.g., trade execution, trade clearing and settlement, trade related cash and security custody, position reconciliations). ▪ The firm's supervisory framework (e.g., supervisory systems & processes, supervisory structure, supervisory personnel). 	Yes		
G2	<p>Mutual Fund-only Advisors and Supervisory Personnel</p> <p>Describe how the firm will clearly identify or delineate its Mutual Fund-only advisors and their related supervisory and compliance staff.</p> <div style="border: 1px solid black; height: 50px; width: 100%;"></div>	Yes		
G3	<p>Controls to Ensure no Activities Outside the Approved Category of Registration</p> <p>Describe the firm's controls to ensure that Mutual-Funds-only Dealing Representatives do not conduct activities outside their approved category of registration.</p> <div style="border: 1px solid black; height: 50px; width: 100%;"></div>	Yes		
G4	<p>Client Accounts in Separate Investment Dealer and Mutual Fund Dealer Divisions</p> <p>Describe how the firm will address its obligations to clients where they have accounts in the separate Investment Dealer and Mutual Fund Dealer divisions of the firm. Include, for example, how the applicant will carry out its obligation to assess suitability with respect to concentration and liquidity of the client's portfolio of investments.</p> <div style="border: 1px solid black; height: 50px; width: 100%;"></div>	Yes		
G5	<p>Exemptive Relief</p> <p>Does applicant plan to apply for exemptive relief from any requirements of the Investment Dealer Rules and Partially Consolidated Rules in connection with its request to become dual-registered?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' proceed to G5.1. If 'No,' proceed to G6.)</p>	Yes		

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
		Dual	ID	MFD
	<p>G5.1. Application for Exemptive Relief - Business Case</p> <p>Please provide the applicant's business case for seeking an exemption from the Investment Dealer and Partially Consolidated Rules ("Investment Dealer Rules"), which must include at a minimum the following information:</p> <ul style="list-style-type: none"> ▪ the specific Investment Dealer Rule(s) that the applicant is requesting exemptive relief from ▪ the specific Mutual Fund Dealer Rule(s) that the applicant is proposing to comply with in lieu of the applicable Investment Dealer Rule(s) ▪ the reason(s) the applicant is applying for exemptive relief and how the exemption would ensure: (i) minimal disruption to existing operations of the mutual fund dealer business; or (ii) efficient operation of the combined firm operations within a single legal entity ▪ the rationale supporting the application and any supporting documentation <p><i>Refer to IIROC Guidance Note GN-1300-21-001 Exemption Applications Relating to IIROC Rules for information on how to make an exemption application. Exemption applications related to the firm's application for membership should be submitted with the Membership Application. Applicants may refer to the CIRO's website for guidance on which Investment Dealer Rules CIRO will consider exemption applications for with respect to dual-registered firms. Exemption applications are subject to review by CIRO staff and require approval by the CIRO Board of Directors.</i></p>			
G6	<p>Reporting on Client Positions held Outside the Dealer</p> <p>Describe in detail the applicant's plans to address the requirement to report on client positions held outside the Dealer (e.g., mutual funds held in client name at the fund company, GICs held in client name at the issuer) in accordance with Section 3809 of the Investment Dealer and Partially Consolidated Rules.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes		
H	PRINCIPAL AND AGENT RELATIONSHIPS			
H1	<p>Approved Persons as Agents</p> <p>Does the applicant intend to conduct its business through Approved Persons retained or contracted as Agents rather than as employees?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If 'Yes,' provide a sample of the Principal/Agent Agreement.)</i></p>	Yes	Yes	Yes
H2	<p>Written Agreement between the Applicant and CIRO regarding Agents</p> <p>Provide the written agreement that the applicant intends to enter into with CIRO to meet the requirements of Section 2303 of the Investment Dealer and Partially Consolidated Rules regarding Agents.</p>	Yes	Yes	
H3	<p>Certification of Compliance with Section 1.1.5 of the Mutual Fund Dealer Rules</p> <p>Provide confirmation that the written agreement the applicant intends to enter into with its agents is in compliance with the provisions of paragraphs (a) through (j) of Section 1.1.5 of the Mutual Fund Dealer Rules.</p>			Yes
H4	<p>Approved Person Compensation and Incentive Program</p> <p>Describe the applicant's compensation and incentive program for its Approved Persons (e.g., Dealing Representatives and supervisory personnel).</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Yes	Yes	Yes
H5	<p>Payment to an Unregistered Corporation</p> <p>Will the applicant pay any remuneration, gratuity benefit or other consideration in respect of business conducted by Mutual-Funds Dealing Representatives on its behalf to an unregistered corporation, where permitted by local securities legislation?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If 'Yes,' provide full details.)</i></p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Yes		Yes

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
		Dual	ID	MFD
I	DEALER AGREEMENTS			
I1	<p>Introducing/Carrying Broker Arrangements</p> <p>Does the applicant plan to enter into any Introducing/Carrying Broker Agreements (or Introducing/Carrying Dealer Agreements)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please describe in detail and provide a copy of the signed Agreement.)</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Yes	Yes	Yes
I2	<p>Level of Mutual Fund Dealer</p> <p>What level of Mutual Fund Dealer, as described in Section 3.1.1 of the Mutual Fund Dealer Rules, is the applicant seeking approval for? (Select one.)</p> <p><input type="checkbox"/> Level 1 – A mutual fund dealer that does not hold client cash, securities or other property; and is required to introduce all of its accounts to a carrying dealer and is not otherwise registered in any other category of registration under securities legislation.</p> <p><input type="checkbox"/> Level 2 – A mutual fund dealer that does not hold client cash, securities or other property.</p> <p><input type="checkbox"/> Level 3 – A mutual fund dealer that holds client cash in a trust account but does not hold client securities or other property in nominee name accounts or in physical storage.</p> <p><input type="checkbox"/> Level 4 – A mutual fund dealer that acts as a carrying dealer, or a mutual fund dealer that holds client securities or other property.</p>			Yes
I3	Registered Plans			
	<p>I3.1. Client Self-Directed Registered Plans</p> <p>Will the applicant offer clients self-directed registered plans for income tax purposes?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' proceed to I3.2. If 'No,' proceed to I4.)</p>	Yes	Yes	Yes
	<p>I3.2. Trustee Agreement for Registered Plans</p> <p>Will the applicant act as an agent for the trustee in administering client self-directed registered plans?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' provide the name of the Trustee and a copy of the signed Trustee Agreement.)</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Yes	Yes	Yes
I4	<p>Outsourcing/Service Arrangements</p> <p>Will the applicant outsource any activities to a Service Provider(s)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If 'Yes,' please provide the name(s) of the Service Provider(s), a description of the activities that will be outsourced, and a copy of the executed Service Agreement(s).</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Yes	Yes	Yes
I5	Referral Arrangements			
	<p>I5.1. Referral Arrangements</p> <p>Does the applicant intend to enter into any referral arrangements in which the applicant or any of its Dealing Representatives agrees to provide or receive a referral fee to or from another person or company?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' proceed to I5.1.1. If 'No,' proceed to J1.</p> <p>I5.1.1. Referral Agreement</p> <p>Provide full details of the referral arrangement(s) and a copy of the signed Referral Agreement(s).</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <p>I5.1.2. Referral Arrangement Disclosure to Clients</p> <p>Provide a copy of the applicant's written disclosure to clients of the referral arrangement(s).</p>	Yes	Yes	Yes

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
		Dual	ID	MFD
J	FINANCIAL OPERATIONS			
J1	Fiscal Year End Provide the applicant's fiscal year end. <input type="text"/>	Yes	Yes	Yes
J2	External Auditor Provide the name and address of the applicant's external auditors. <input type="text"/>	Yes	Yes	Yes
J3	Audit Partner Provide the name of the applicant's audit partner. <input type="text"/>	Yes	Yes	Yes
J4	Audited Form 1 (Investment Dealers) Provide an audited Investment Dealer Form 1 that has been prepared within the last 90 days by a qualified panel auditor, demonstrating that the applicant is in compliance with the applicable capital requirements.	Yes	Yes	
J5	Audited Form 1 (Mutual Fund Dealers) Provide an audited Mutual Fund Dealer Form 1 that has been prepared within the last 90 days, demonstrating that the applicant is in compliance with the applicable capital requirements.			Yes
J6	Monthly Unaudited Financial Reports Provide Monthly Financial Reports for any month end subsequent to the date of the audited Form 1.	Yes	Yes	
J7	Monthly Unaudited Mutual Fund Dealer Form 1 Provide an unaudited Form 1 for any month-end subsequent to the date of the audited Mutual Fund Dealer Form 1 that must be provided in accordance with J5 above.			Yes
J8	Financial Statements Provide the following financial statements: J8.1. The most recent audited financial statements. J8.2. Financial statements for the three preceding years.	Yes	Yes	Yes
J9	System of Books and Records Please name the system of books and records (i.e., back-office system, accounting system) the applicant has or will have in place and indicate whether it is a proprietary system or if it is administered by an external provider. <input type="text"/>	Yes	Yes	Yes
J10	Auditor Letter/Report regarding System of Books and Records Provide a letter/report from the applicant's external auditors, confirming that the applicant maintains a proper system of books and records.	Yes	Yes	Yes
J11	Audit Engagement Partner Letter of Acknowledgement Provide a Letter of Acknowledgement completed by the audit engagement partner of the applicant, confirming that it is familiar with the Mutual Fund Dealer Rules, policies and forms as they relate to matters required to be reported on.			Yes
J12	Banking Information Provide the name and address of the applicant's bankers. <input type="text"/>	Yes	Yes	

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
		Dual	ID	MFD
J13	<p>Banking Information for Trust Account (only applicable if selected "Level 3" or "Level 4" for I2 above)</p> <p>Provide the following for the applicant's trust account (where client cash will be held):</p> <p>J13.1. The name and address of the financial institution where the applicant's trust account is located.</p> <p>J13.2. A copy of the trust bank account evidencing it is a "trust account."</p> <p>J13.3. A copy of the Notification to Financial Institution sent in accordance with Section 3.3.2 of the Mutual Fund Dealer Rules.</p>			Yes
J14	<p>Insurance Coverage</p> <p>Provide evidence that the applicant has sufficient insurance coverage as prescribed in the Investment Dealer and Partially Consolidated Rules or Mutual Fund Dealer Rules, as applicable. This includes the following:</p> <p>J14.1. Mail Insurance</p> <p>J14.2. Insurance against losses, using a Financial Institution Bond ("FIB")</p>	Yes	Yes	Yes
J15	<p>Errors & Omissions Insurance or Surety Bonding Insurance</p> <p>Does the applicant have errors & omissions insurance or surety bonding insurance?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If 'Yes,' provide full details, including the type of insurance, limits of liability and deductible amounts.</i></p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes
J16	<p>Investor Protection Fund Membership</p> <p>Provide evidence of the applicant's Investor Protection Fund (IPF) membership, or a copy of its application for IPF membership.</p>	Yes	Yes	Yes
K POLICIES, PROCEDURES AND SUPERVISION				
K1	<p>Corporate Governance Document</p> <p>Provide a copy of the applicant's governance document that sets out the organizational structure and reporting relationships (i.e., the applicant's chain of senior management, supervisory accountability and responsibilities).</p>	Yes	Yes	Yes
K2	<p>Supervision Framework</p> <p>Describe the applicant's supervision framework, including the supervisory structure and personnel, as well as the supervisory systems and processes that the applicant will have in place.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes
K3	<p>Supervisors / Designated Supervisors</p> <p>Please provide the following information for each Supervisor and Designated Supervisor of the applicant:</p> <ul style="list-style-type: none"> ▪ the individual's full name and their category of Supervisor or Designated Supervisor ▪ the individual's NRD number (if currently registered) ▪ a detailed description of how the individual meets the proficiency and experience requirements for their requested registration category, in accordance with Section 2602 of the Investment Dealer and Partially Consolidated Rules. <p><i>Note: Applicants must have Supervisors / Designated Supervisors responsible for the following (subject to the firm's activities):</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> the supervision of RRs or IRs <input type="checkbox"/> the supervision of the opening of new accounts and the supervision of account activity <input type="checkbox"/> the pre-approval of advertising, sales literature and correspondence <input type="checkbox"/> the supervision of managed accounts <input type="checkbox"/> the supervision of discretionary accounts 	Yes	Yes	

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
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	<input type="checkbox"/> <i>the supervision of options trading accounts</i> <input type="checkbox"/> <i>the supervision of futures contract / futures contract options trading accounts</i> <input type="checkbox"/> <i>the supervision of research reports</i> <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>			
K4	Account Supervision Processes Describe the applicant's process for conducting account supervision, including but not limited to a description of the tool(s) or system(s) used to conduct account reviews, the personnel conducting those reviews, and the applicant's procedures for maintaining evidence of supervision. <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>	Yes	Yes	Yes
K5	Policies & Procedures Manual Provide a copy of the applicant's Policies and Procedures Manual.	Yes	Yes	Yes
K6	Borrowing for Investment Purposes Describe the applicant's procedures for assessing the suitability of "borrowing to invest" strategies and the applicant's framework and criteria for supervising the use of such strategies. <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>	Yes	Yes	Yes
K7	Internal Control Policy Statements Provide a copy of the applicant's internal control policy statements prepared in accordance with Sections 4100 Part A, 4200, 4300, 4400 and 4900 of the Investment Dealer and Partially Consolidated Rules.	Yes	Yes	
K8	Credit Risk Policies & Procedures Provide a copy of the credit risk policies and procedures that the applicant has in place to monitor and evaluate risk to counterparties with which they conduct securities related business transactions.	Yes	Yes	
K9	Cybersecurity Risk Management Describe the applicant's cybersecurity risk management framework and provide a copy of the applicant's cybersecurity risk management policy(ies). <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>	Yes	Yes	Yes
K10	Cybersecurity Incident Reporting Procedures Describe the applicant's cybersecurity incident reporting procedures and infrastructure to identify and report any such events to CIRO. <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>	Yes	Yes	
K11	Client Complaints Policies and Procedures Provide a copy of the applicant's policies to effectively deal with client complaints.	Yes	Yes	Yes
K12	Complaint Handling Brochure Provide a copy of the applicant's Complaint Handling Brochure and describe how the applicant will ensure that this required disclosure is provided to new clients at account opening. <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>	Yes	Yes	

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
		Dual	ID	MFD
K13	Client Complaint Information Form Provide a copy of the applicant's Client Complaint Information Form and describe how the applicant will ensure that this required disclosure is provided to new clients at account opening. <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			Yes
K14	Designated Complaints Officer Provide the full name of the applicant's designated complaints officer as required in Section 3722 of the Investment Dealer and Partially Consolidated Rules. <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	
K15	Mutual Fund Dealer Branch Review Program Provide a copy of the applicant's internal branch review program for its Mutual Fund Dealer business that demonstrates compliance with Section 500 of the Mutual Fund Dealer Rules.	Yes		Yes
K16	Remote Branch Supervision Does the applicant's branch supervision structure for its Mutual Fund Dealer business involve remote supervision, where the designated branch manager is not normally present at that branch location. <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If 'Yes,' please provide the applicant's proposal for remote supervision, as required by Section 2.4.4(c) of the Mutual Fund Dealer Rules and described in MFDA MSN-0082 Branch Supervision.</i>	Yes		Yes
L CURRENT AND PRIOR REGISTRATION OR LICENSING				
L1	Registration or Licensing for Trading/Advising in Securities Is the applicant, any partner, director, or officer of the applicant, or any company or partnership that the applicant has ever been a partner or shareholder, currently registered or licensed, or has ever applied for registration or licensing (or exemptions from the same), in any capacity under any legislation governing trading or advising in securities, futures contracts or futures contract options, in any province, territory, state or country? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If 'Yes,' proceed to L1.1. If 'No,' proceed to L2.)</i>	Yes	Yes	Yes
	L.1.1. Please provide the following information for the applicant, partner, director, officer, company or partnership, referenced in L1 above: <ul style="list-style-type: none"> ▪ all the authorities with which the applicant, partner, director, officer, company or partnership is registered or has applied for registration; ▪ the date(s) of registration; ▪ whether the registration is currently in effect; and ▪ all jurisdictions in which the applicant, partner, officer, company or partnership currently holds or intends to hold any client accounts. <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			
L2	Registration or Licensing other than for Securities Related Activities Is the applicant currently registered or licensed or has it applied for registration or licensing in any capacity other than trading or advising in securities, futures contracts, or futures contract options, in any province, territory, state or country? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If 'Yes,' provide the name of the legislation, the nature of the registration or license, and whether it is currently in effect.</i> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
		Dual	ID	MFD
M	REFUSAL, SUSPENSION, CANCELLATION OR DISCIPLINARY MEASURE			
	<p>Note: For the questions in Section M, "the applicant or its associated parties" refers to:</p> <ul style="list-style-type: none"> ▪ the applicant; ▪ any partner, director or officer of the applicant; ▪ any shareholder owning a significant equity interest in the applicant; and ▪ any partnership or company of which the applicant is or was at the time a partner or holder of more than 10% of the voting shares. 			
M1	<p>Refusal or Restriction of Registration</p> <p>Has the applicant or its associated parties ever: (i) been refused registration or licensing; (ii) had its registration or license suspended, restricted, cancelled; or (iii) had terms and conditions imposed on it by any securities, futures contracts or futures contract options regulatory authority in any province, territory, state or country?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>	Yes	Yes	Yes
M2	<p>Refusal or Restriction of Registration other than Securities Related Activities</p> <p>Has the applicant or its associated parties ever been refused registration or licensing, or has its registration or license ever been suspended or cancelled under any legislation which requires registration or licensing to deal with the public in any capacity other than trading or advising in securities, futures contracts or futures contract options in any province, territory, state or country?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>	Yes	Yes	Yes
M3	<p>Denial of an Exemption from Registration or Licensing</p> <p>Has the applicant or its associated parties ever been denied the benefit of any exemption from registration or licensing provided by any act or regulation governing trading in securities, futures contracts or futures contract options in any province, territory, state or country?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>	Yes	Yes	Yes
M4	<p>Regulatory Authority Proceeding</p> <p>Has the applicant or its associated parties ever been the subject of any regulatory authority proceedings, including a breach or alleged breach under any legislation governing trading or advising in securities, futures contracts or futures contract options in any province, territory, state or country?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If "Yes," please provide full details.)</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>	Yes	Yes	Yes
N	SELF REGULATORY ORGANIZATIONS			
	<p>Note: For the questions in Section N, "the applicant or its associated parties" refers to:</p> <ul style="list-style-type: none"> ▪ the applicant; ▪ any partner, director or officer of the applicant; ▪ any shareholder owning a significant equity interest in the applicant; and ▪ any partnership or company of which the applicant is or was at the time a partner or holder of more than 10% of the voting shares. 			

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
		Dual	ID	MFD
N1	<p>Member of an Exchange, Association or Similar Organization</p> <p>Is the applicant or its associated parties now or ever been a member of any stock exchange, commodities exchange, commodity futures exchange, association of investment dealers, investment bankers, brokers, broker-dealers, mutual fund dealers, commodity futures dealers, investment counsel, other professional association or any similar organization in any province, territory, state or country?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes
N2	<p>Refusal of Registration, Licensing or Membership</p> <p>Has the applicant or its associated parties ever been refused registration, licensing, approval for membership, or any other approval by any authority described in N1 above?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes
N3	<p>Disciplinary Action</p> <p>Has the applicant or its associated parties ever been the subject of discipline undertaken by any authority as described in N1 above?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes
O	OFFENCES UNDER THE LAW			
	<p>Note: For the questions in Section O, "the applicant or its associated parties" refers to:</p> <ul style="list-style-type: none"> ▪ the applicant; ▪ any partner, director or officer of the applicant; ▪ any shareholder owning a significant equity interest in the applicant; and ▪ any partnership or company of which the applicant is or was at the time a partner or holder of more than 10% of the voting shares 			
O1	<p>Securities-Related Offences</p> <p>Has the applicant or its associated parties ever been convicted of any offence, or is currently the subject of any proceeding, relating to: (i) trading or advising in securities, futures contracts, or futures contract options, (ii) the theft or fraud of securities, or (iii) been a party to any proceedings taken on account of fraud arising out of any trade in or advice respecting securities under any law of any province, territory, state or country?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes
O2	<p>Non-Securities Offences</p> <p>Has the applicant or its associated parties ever been convicted of, or is currently the subject of any proceeding, related to any non-securities related offences under any law of any province, territory, state or country?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
		Dual	ID	MFD
O3	<p>Charges or Indictment for Criminal Offences</p> <p>Has the applicant, or its associated parties ever been convicted of, or is currently the subject of any proceeding, related to any charge or indictment under any law of any province, territory, state or country for criminal offences or other conduct not described in O1 and O2 above?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes
P	CIVIL PROCEEDINGS			
	<p>Note: For the questions in Section P, "the applicant or its associated parties" refers to:</p> <ul style="list-style-type: none"> ▪ the applicant; ▪ any partner, director or officer of the applicant; ▪ any shareholder owning a significant equity interest in the applicant; and ▪ any partnership or company of which the applicant is or was at the time a partner or holder of more than 10% of the voting shares 			
P1	<p>Misrepresentation, Fraud or Similar Conduct</p> <p>Has the applicant or its associated parties ever been found to have committed misrepresentation, fraud or similar conduct?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes
P2	<p>Pending Civil Proceedings</p> <p>Are there any civil proceedings pending under any law of any province territory, state or country against the applicant or its associated parties?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes
P3	<p>Bankruptcy</p> <p>Has the applicant or its associated parties ever:</p> <ol style="list-style-type: none"> a) been declared bankrupt, b) made a voluntary assignment in bankruptcy, c) made a compromise or agreement with its creditors, d) gone out of business leaving debts outstanding, or e) had a receiver and manager assume control of its/their assets? <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If 'Yes,' please provide full details and a copy of any discharge, release or document with similar effect.</i></p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes
P4	<p>Judgement or Garnishment</p> <p>Has any judgment or garnishment ever been rendered against the applicant or its associated parties, or is any judgment or garnishment outstanding in any civil court in any province, state, territory or country for damages or other relief in respect of fraud or for any reason whatsoever?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes,' please provide full details.)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes	Yes	Yes

Required Information Complete the questions for the applicable Type of Applicant		Type of Applicant		
		Dual	ID	MFD
P5	Fidelity Bond Has the applicant ever applied for a surety or fidelity bond and been refused? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If 'Yes,' please provide name and address of bonding company and the date and particulars of refusal.</i> <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>	Yes	Yes	Yes
Q EXEMPTIVE RELIEF				
Q1	Application for Exemptive Relief Does applicant plan to apply for exemptive relief from securities rules in conjunction with its Membership Application? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If 'Yes,' please provide full details and a copy of the application for exemptive relief.)</i> <div style="border: 1px solid black; height: 60px; width: 100%; margin-top: 5px;"></div>	Yes	Yes	Yes

CERTIFICATE AND AGREEMENT

The applicant hereby certifies that the foregoing statements are true and correct and hereby undertakes to notify Canadian Investment Regulatory Organization (CIRO) in writing of any material changes herein as prescribed in the Rules.

The applicant acknowledges that it has received a copy of the Rules of CIRO.

The applicant agrees that it is conversant with the Rules and agrees that, if admitted to membership, will keep fully informed about them as they are from time to time amended or supplemented and will comply with them as so amended and supplemented.

The applicant agrees that, if in connection with the review or consideration of any application for Membership, the Board of Directors is of the opinion that the nature of the applicant's business, its financial condition, the conduct of its business, the completeness of the application, the basis on which the application was made or any staff review in respect of the application in accordance with the Rules has required, or can reasonably be expected to require, excessive attention, time and resources of CIRO, the Board of Directors may require the applicant to reimburse CIRO for its costs and expenses which are reasonably attributable to such excessive attention, time and resources or provide an undertaking or security in respect of such reimbursement.

The applicant agrees to submit to the jurisdiction of CIRO and, wherever applicable, the Board of Directors and committees.

The applicant agrees that so long as it remains a Dealer Member of CIRO, it will be and remain licensed or registered as an investment dealer and/or mutual fund dealer or equivalent under the applicable law of the province(s) where the applicant carries on business.

DATED at _____ this ____ day _____ of _____.

BY

Print Name of Applicant

Print Name of Executive

Business Title

Signature of Executive

STATUTORY DECLARATION

(by an Executive of the applicant)

CITY OF _____, PROVINCE OF _____

IN THE MATTER OF THE APPLICATION OF

FOR MEMBERSHIP IN THE CANADIAN INVESTMENT REGULATORY ORGANIZATION.

I, _____, of the _____ of _____

in the province of _____

SOLEMNLY DECLARE AND UNDERTAKE THAT:

1. I am _____ of the applicant named in the foregoing Application for Membership and thereby have the authority and knowledge to make the foregoing application.
2. I have read and understood the Application for Membership.
3. The statements contained in the application and the attachments thereto are true.

AND I make this solemn declaration conscientiously believing it to be true and knowing that it is the same force and effect as if made under oath and by virtue of the *Canada Evidence Act*.

(Signature of Executive)

DECLARED before me at _____ this _____ day of _____, 20____.

(Commissioner for Oaths or Notary Public)

Membership Application – Documentation Checklist

Refer to the table below for a list of supporting documents, forms, and other materials that must be submitted with the Membership Application.

Membership Application Form - Reference		Requested Document	Prescribed Form or Template	Link to Prescribed Form or Template		Type of New Applicant			Applicant to Complete	
				EN	FR	Dual	ID	MFD	Attached	N/A
A	GENERAL INFORMATION									
A1.3	Former name(s) of applicant	Articles of Amendment evidencing change in legal name				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
A2.1	Category of Registration	Form 33-109F6 Firm Registration	Yes			Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
		Form 33-109F4 Registration of Individuals and Review of Permitted Individuals	Yes			Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
B	LEGAL STATUS AND OWNERSHIP STRUCTURE									
B1.4	Articles of Incorporation	Articles of Incorporation or other documents evidencing formation of the applicant firm				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
B2.2	Subordinated Debt	IIROC Uniform Subordinated Loan Agreement	Yes	EN	FR	Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>
		MFDA Uniform Subordinated Loan Agreement	Yes	EN	FR			Yes	<input type="checkbox"/>	<input type="checkbox"/>
B2.3	Subordinated Debt Secured by Creditor	Override Acknowledgement for MFDA Uniform Subordinated Loan Agreement	Yes	EN	FR			Yes	<input type="checkbox"/>	<input type="checkbox"/>
B2.5.1	Interest in the Applicant's Capital (10% or More)	Investor Application Form	Yes	EN	FR	Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>
B2.5.2	Interest in the Applicant's Capital (Less than 10%)	Investor Notification Form	Yes	EN	FR	Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>
B4.1	Firm Structure and Ownership	Corporate Ownership Chart				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
C	DIRECTORS, OFFICERS, EXECUTIVES AND OTHER REGISTRANTS									
C1	List of Directors, Officers and Executives	List of Directors, Officers and Executives				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
C6	Approved Person Trade Name or Business Name	Trade Names of Approved Persons	Yes	EN	FR	Yes		Yes	<input type="checkbox"/>	<input type="checkbox"/>
D	BUSINESS OPERATIONS									
D2	Corporate Organizational Chart	Corporate Organizational Chart				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
D3	Business Plan	5-year Business Plan				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
D6	Business Locations	List of Business Locations	Yes	EN	FR	Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
D7.2.1.2	Participating Organization - Trade Flow	Trade Flow Diagram				Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>
D7.2.1.3	Participating Organization - Policies & Procedures	Policies & Procedures to address UMIR requirements				Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>
D8.2.1	Crypto Firms - Diagram of Counterparties & Interactions	Crypto Firms - Dataflow Diagram (Counterparties & Interactions)				Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>
D8.2.2	Crypto Firms - Detailed Diagrams of Client Transactions	Crypto Firms - Detailed Diagrams of Client Transactions				Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>
D9	Business Continuity Plan	Business Continuity Plan				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
E	CLIENT ACCOUNT DOCUMENTS AND DISCLOSURES									
E1.1 E1.2	Client Account Opening Documents	Samples of Client Account Opening Documents				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
E1.3	Online Account Opening Process	Online Account Opening - Supporting Documentation				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
E2.1 E2.2	Client Disclosures	Samples of Client Disclosures				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>

Membership Application Form - Reference		Requested Document	Prescribed Form or Template	Link to Prescribed Form or Template		Type of New Applicant Dual = Dual-Registered ID = Investment Dealer MFD = Mutual Fund Dealer			Applicant to Complete		
				EN	FR	Dual	ID	MFD	Attached	N/A	
F	CLIENT REPORTING										
F1.1	Client Reporting - Client Account Statements	Sample Client Account Statement				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>	
F1.2	Client Reporting - Trade Confirmations	Sample Trade Confirmation				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>	
F1.3	Client Reporting - Annual Report on Charges and Other Compensation	Sample Annual report on Charges and Other Compensation				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>	
F1.4	Client Reporting - Annual Performance Report	Sample Annual Performance Report				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>	
G	INTEGRATION PLAN										
G1	Organization of Investment Dealer Business and Mutual Fund Dealer Business	Detailed Plan to Operate as a Dual Registered dealer				Yes			<input type="checkbox"/>	<input type="checkbox"/>	
G5.1	Application for Exemptive Relief - Business Case	Application for Exemptive Relief - Business Case				Yes			<input type="checkbox"/>	<input type="checkbox"/>	
H	PRINCIPAL AND AGENT RELATIONSHIPS										
H1	Approved Persons as Agents	Sample Principal/Agent Agreement (Agreement with Agents)				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>	
H2	Written Agreement between the Applicant and CIRO regarding Agents	Written Agreement between the Applicant and CIRO regarding Agents	Yes	EN	FR	Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>	
H3	Certification of Compliance with Section 1.1.5 of the Mutual Fund Dealer Rules	Written Confirmation of Compliance with Section 1.1.5 of the Mutual Fund Dealer Rules	Yes	EN	FR			Yes	<input type="checkbox"/>	<input type="checkbox"/>	
I	DEALER AGREEMENTS										
I1	Introducing/Carrying Broker Arrangements	Signed Introducing/Carrying Broker Agreement(s) or Introducing/Carrying Dealer Agreement(s)	Yes (Dual/ID)	Type 1 - EN	Type 1 - FR	Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>	
			Yes (Dual/ID)	Type 2 - EN	Type 2 - FR	Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>	
			Yes (Dual/ID)	Type 3 - EN	Type 3 - FR	Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>	
			Yes (Dual/ID)	Type 4 - EN	Type 4 - FR	Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>	
I3.2	Trustee Agreement for Registered Plans	Signed Trustee Agreement				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>	
I4	Outsourcing/Service Arrangements	Signed Outsourcing or Service Agreements				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>	
I5.1.1	Referral Agreement	Signed Referral Agreements(s)				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>	
I5.1.2	Referral Arrangement Disclosure to Clients	Referral Arrangement Disclosure to Clients				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>	
J	FINANCIAL OPERATIONS										
J4	Investment Dealer Audited Form 1	Audited Investment Dealer Form 1 prepared within the last 90 days	Yes	EN	FR	Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>	
J5	Mutual Fund Dealer Audited Form 1	Audited Mutual Fund Dealer Form 1 prepared within the last 90 days	Yes	EN	FR			Yes	<input type="checkbox"/>	<input type="checkbox"/>	
J6	Monthly Unaudited Financial Reports	Monthly Unaudited Financial Reports for any month-end after the date of the Audited Form 1	Yes	SIRFF	SIRFF	Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>	
J7	Monthly Unaudited Mutual Fund Dealer Form 1	Unaudited Mutual Fund Dealer Form 1 for any month-end after the date of the Audited Form 1	Yes	EN	FR			Yes	<input type="checkbox"/>	<input type="checkbox"/>	

Membership Application Form - Reference		Requested Document	Prescribed Form or Template	Link to Prescribed Form or Template		Type of New Applicant Dual = Dual-Registered ID = Investment Dealer MFD = Mutual Fund Dealer			Applicant to Complete	
				EN	FR	Dual	ID	MFD	Attached	N/A
J8.1	Audited Financial Statements - most recent	Most recent Audited Financial Statements				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
J8.2	Financial Statements for the 3 preceding years	Financial Statements for 3 years preceding the Application				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
J10	Auditor Letter/Report regarding System of Books and Records	External Auditor Letter/Report confirming the Applicant maintains a proper System of Books & Records	Yes Dual/ID	Recognized EDP Service Provider (Types 1 & 2)	Fournisseurs de Services TED Reconnus (Types 1 & 2)	Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
			Yes Dual/ID	Recognized EDP Service Provider (Types 3 & 4)	Fournisseurs de Services TED Reconnus (Types 3 & 4)	Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
			Yes Dual/ID	Proprietary EDP Systems	Systèmes exclusifs de TED	Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
J11	Audit Engagement Partner Letter of Acknowledgement	Audit Engagement Partner Letter of Acknowledgement						Yes	<input type="checkbox"/>	<input type="checkbox"/>
J13.2	Banking Information for Trust Account - Copy of Trust Bank Account	Evidence of Trust Account						Yes	<input type="checkbox"/>	<input type="checkbox"/>
J13.3	Banking Information for Trust Account - Notice to Financial Institution	Notification to Financial Institution per Section 3.3.2 of the Mutual Fund Dealer Rules						Yes	<input type="checkbox"/>	<input type="checkbox"/>
J14.1	Mail Insurance	Copy of Mail Insurance policy				Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>
J14.2	Financial Institution Bond ("FIB")	Copy of FIB policy				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
J16	Investor Protection Fund ("IPF") Membership	Evidence of IPF Membership or Application				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
K	POLICIES, PROCEDURES AND SUPERVISION									
K1	Corporate Governance Document	Corporate Governance Document				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
K5	Policies and Procedures Manual	Policies & Procedures Manual				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
K7	Internal Control Policy Statements	Internal Control Policy Statements				Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>
K8	Credit Risk Policies and Procedures	Credit Risk Policies & Procedures				Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>
K9	Cybersecurity Risk Management	Cybersecurity Risk Management Policy				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
K11	Client Complaints Policies and Procedures	Client Complaints Policies & Procedures				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
K12	Complaint Handling Brochure	Complaint Handling Brochure	Yes	EN	FR	Yes	Yes		<input type="checkbox"/>	<input type="checkbox"/>
K13	Client Complaint Information Form	Client Complaint Information Form	Yes	EN	FR			Yes	<input type="checkbox"/>	<input type="checkbox"/>
K15	Mutual Fund Dealer Branch Review Program	Mutual Fund Dealer Branch Review Program				Yes		Yes	<input type="checkbox"/>	<input type="checkbox"/>
K16	Remote Branch Supervision	Remote Branch Supervision Proposal				Yes		Yes	<input type="checkbox"/>	<input type="checkbox"/>
P	CIVIL PROCEEDINGS									
P3	Bankruptcy	Copy of Bankruptcy discharge, release or similar document				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>
Q	EXEMPTIVE RELIEF									
Q1	Application for Exemptive Relief	Application for Exemptive Relief				Yes	Yes	Yes	<input type="checkbox"/>	<input type="checkbox"/>