

NEW CLIENT APPLICATION FORM		
Type of Account: <input type="checkbox"/> Individual <input type="checkbox"/> Joint <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Partnership <input type="checkbox"/> Other: _____		
For corporations, partnerships, trusts or other, what is the nature of your business?		
Applicant Information		
Last Name (entity name):	First Name:	Initials:
Date of Birth:	SIN (or business number):	
Current Address:		
City:	Province:	Postal Code:
Citizenship:	Email:	
Mobile:	Home Phone:	Fax:
Number of Dependents:	Marital Status:	
Applicant Employment Information		
Current Employer:	<input type="checkbox"/> Self Employed	
Occupation/Position:	Annual Income:	
Employer Address:		How long?
City:	Province:	Postal Code:
Phone:	Email:	Fax:
Applicant Spousal Information		
Name:		
Occupation:	Employer:	
Joint Tenant/Trust Beneficiary Information		
<input type="checkbox"/> Joint Tenant <input type="checkbox"/> Trust Beneficiary		
Last Name (entity name):	First Name:	Initials:
Date of Birth:	SIN (or business number):	
Current Address:		
City:	Province:	Postal Code:
Citizenship:	Email:	
Mobile:	Home Phone:	Fax:
Number of Dependents:	Marital Status:	
Employment Information for Joint Tenant/Trust Beneficiary (if applicable)		
Current Employer:	<input type="checkbox"/> Self Employed	
Occupation/Position:	Annual income:	
Employer Address:		How long?
City:	Province:	Postal Code:
Phone:	Email:	Fax:
Financial Information for Applicant and Joint Tenant/Trust Beneficiary (if applicable)		
Financial Institution Name and Branch (Applicant):		
Financial Institution Name and Branch (Joint Tenant/Trust Beneficiary):		
Applicant's Annual Income:	Joint Tenant's or Trust Beneficiary's Annual Income:	
Applicant's Net Worth*:	Joint Tenant's or Trust Beneficiary's Net Worth:	
*Net worth means total assets minus total liabilities		

CLIENT INVESTMENT INFORMATION
(for Applicant, Joint Tenant and Trust Beneficiary (as applicable))

<p>What is your investment knowledge?</p> <p><input type="checkbox"/> Sophisticated (considerable knowledge; follow financial markets; manage own affairs)</p> <p><input type="checkbox"/> High (good working knowledge of financial markets and products)</p> <p><input type="checkbox"/> Medium (general understanding of financial markets and products)</p> <p><input type="checkbox"/> Limited (rely exclusively on a financial advisor)</p>	<p>What is your investment time horizon?</p> <p><input type="checkbox"/> 0 - 1 year</p> <p><input type="checkbox"/> 1 - 3 years</p> <p><input type="checkbox"/> 4 - 5 years</p> <p><input type="checkbox"/> 6 - 9 years</p> <p><input type="checkbox"/> > 10 years</p>
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What are your investment needs and objectives?

Income (seeking steady income stream from investments, marginal capital growth): _____%

Balanced (seeking a balance of income and growth): _____%

Growth (seeking growth of principal through capital appreciation): _____%

Aggressive Growth (seeking growth through higher risk investments): _____%

Total: 100%

<p>What is your risk tolerance? (check one)</p> <p><input type="checkbox"/> Low - Safety of capital with an expectation of small return.</p> <p><input type="checkbox"/> Moderate - Moderate asset fluctuation but with higher return or potential loss.</p> <p><input type="checkbox"/> High - Higher fluctuation in the short term, with significant potential for loss or return over the long term.</p>	<p>Mortgage/real estate investment experience?</p> <p><input type="checkbox"/> Syndicated mortgages</p> <p><input type="checkbox"/> Real estate syndications</p> <p><input type="checkbox"/> Publicly-traded REITs, real estate companies or MICs</p> <p><input type="checkbox"/> Prospectus exempt REIT, MIC or real estate company offerings</p> <p><input type="checkbox"/> Other (describe): _____</p>
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Are you (or the joint tenant or trust beneficiary) or your (their) spouse a director or officer of a reporting issuer or a publicly-traded company, or director or officer of an insider or subsidiary of a reporting issuer or a publicly-traded company, or do you (or the joint tenant or trust beneficiary) have beneficial ownership or control and direction of more than 10% of the voting rights of a reporting issuer or publicly-traded company?

Yes **No** If yes, provide details:

PRIVACY POLICY ACKNOWLEDGMENT

I/we hereby consent to the collection, use and disclosure of my personal information in accordance with the privacy policy of Romspen Investment Corporation ("**Privacy Policy**"). I/we hereby acknowledge having read the Privacy Policy which is available at:
www.romspen.com/bottom-link/legal.aspx.

If I am/we are unable to access the Privacy Policy electronically, I/we acknowledge being offered a hard copy of the Privacy Policy.

CLIENT ACKNOWLEDGEMENT

I/we hereby acknowledge that the above noted information is current and accurate. Romspen Investment Corporation (Romspen) may rely thereon until it receives notice of any changes. I/we also acknowledge receipt of the Romspen Disclosure Statement and by signing below, I/we indicate that I/we have read and understand all the information and conditions contained therein.

<p>_____ Signature of Applicant or Authorized Signatory</p>	<p>_____ Signature of Joint Tenant, Trust Beneficiary or Authorized Signatory</p>
<p>Date: _____</p>	<p>Date: _____</p>

For use by Romspen Investment Corporation:

A. Did you meet the applicant in person? Yes No

Identity documents reviewed by:

Print Name: _____

Signature: _____

Date: _____

How did you verify identity? _____

Reviewed identity document in the applicant's presence:

Document Type: _____

Number: _____

Expiry Date: _____

Acceptable identity documents include: birth certificate; valid driver's licence; current passport; record of landing or permanent resident card; or other government-issued identification.

B. When the applicant is not present in person, we will require 2 of the following:

1. an **Attestation as to Identity Form** completed by a commissioner or guarantor;
2. **evidence of a deposit account** with a financial entity (e.g. copy of a bank statement or a cancelled cheque);
3. refer to the applicant's **credit file**, with their permission

C. Identity Documents for Corporations and Other Entities

If the applicant is not an individual, the entity must complete the Entity Certificate (Schedule A), unless exempted, and provide the supporting documentation referred to in the Entity Certificate. In addition, each individual authorized to bind the entity must have their identity verified in accordance with A or B above (to a maximum of 3 individuals).

Application approved by:

Name: _____

Title: _____

Signature: _____

Date: _____

Client ID: _____

SCHEDULE "A"
Subscribers other than Individual

[insert name of corporation or other entity above]

CERTIFICATE

TO: Romspen Investment Corporation ("RIC")
AND TO: Romspen Mortgage Investment Fund (the "Fund")
RE: Subscription for Units of the Fund

I, _____ *[Name of Signatory]*, of _____ *[Name of Entity]* (the "**Entity**"), do hereby certify for and on behalf of the Entity, but without personal liability, to the best of my knowledge, as follows:

1. I am the _____ *[Title]* of the Entity, and as such have knowledge of the matters certified to herein and have the power to bind the Entity;
2. the primary business of the Entity is _____;
3. the Entity has not taken any steps to terminate its existence, to amalgamate, to continue into any other jurisdiction or to change its [corporate] existence in any way and no proceedings have been commenced or threatened, or actions taken or resolutions passed that could result in the Entity ceasing to exist;
4. the Entity is not insolvent and no acts or proceedings have been taken by or against the Entity or are pending in connection with the Entity, and the Entity is not in the course of, and has not received any notice or other communications, in each case, in respect of, any amalgamation, dissolution, liquidation, insolvency, bankruptcy or reorganization involving the Entity, or for the appointment of a receiver, administrator, administrative receiver, trustee or similar officer with respect to all or any of its assets or revenues or of any proceedings to cancel its constating certificate or declaration or to otherwise terminate its existence or of any situation which, unless remedied, would result in such cancellation or termination;
5. the Entity has not failed to file such returns, pay such taxes, or take such steps as may constitute grounds for the cancellation or forfeiture of its certificate, declaration or existence;
6. attached to this certificate are true copies of the articles of incorporation, declaration of trust, partnership agreement and/or other constating documents of the Entity (plus, in the case of a corporation, a certificate of corporate status or a record that confirms the corporation's existence, for example, a letter or a notice of assessment for a corporation from a municipal, provincial, territorial or federal government received within the past 12 months);
7. the current [directors] [trustees] [managing partners] of the Entity and their occupations are listed below:

Name: _____ Occupation: _____

Name: _____ Occupation: _____

Name: _____ Occupation: _____

8. the names, addresses and occupations of all individuals who own or control directly or indirectly 25% or more of the [voting shares of the] Entity are listed below:

Name: _____

Address: _____

Occupation: _____

Name: _____

Address: _____

Occupation: _____

Name: _____

Address: _____

Occupation: _____

9. the names, titles and signatures of individuals who have the power to provide instructions to the Fund and RIC on behalf of the Entity are as follows:

Name	Title	Signature
_____	_____	_____
_____	_____	_____
_____	_____	_____

IN WITNESS WHEREOF I have hereunto signed my name at _____ *[Insert City]* this _____ day of _____, _____ *[Insert Date]*.

By: _____

Name:

Title:

By: _____

Name:

Title:

By: _____

Name:

Title:

I/we have authority to bind the Entity.