

**Documentation Package:  
Withdrawal Based on Shortened Life Expectancy  
Under Manitoba Pension Legislation  
CIBC Asset Management Inc.**

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**Instructions to the Locked-In Retirement Account (“LIRA”)/Life Income Fund (“LIF”) annuitant for completing this Documentation Package  
(only to be used for those plans locked-in under Manitoba Pension Legislation).**

To qualify for this type of withdrawal, you, the Annuitant/Applicant, must complete Part 1: Withdrawal Request Based on Shortened Life Expectancy Under Manitoba Pension Legislation (“Part 1 Withdrawal Request”) and provide it to the Administrator along with completed Part 2: Certification by Physician for a Withdrawal Based on Shortened Life Expectancy Under Manitoba Pension Legislation (“Part 2 Certification by Physician”).

Additionally, if you are a member-owner and have a spouse or common-law partner, in order for your Part 1 Withdrawal Request to proceed,

- your spouse or common-law partner will have to complete and provide a written consent Form 7 “*Consent To Withdrawal From LIRA or LIF Due To Terminal Illness Or Disability*”.
- if the Plan is a LIRA, your spouse or common-law partner will have to provide a completed joint pension waiver Form 5 “*Waiver of 60% Joint Pension Entitlement For Pension Plan Or Locked-In Retirement Account*”.

Within 60 days after receiving the completed Part 1 Withdrawal Request and Part 2 Physician’s Certification, the Administrator must provide to you, and in the case where you are a member-owner with a spouse or common-law partner, to that spouse or common-law partner, Part 3: Statement of Information to Annuitant and Spouse or Common-law Partner if Applicable For Withdrawal Based on Shortened Life Expectancy Under Manitoba Pension Legislation (“Part 3 Statement of Information”) that sets out the balance of the Plan as at the date of the Part 1 Withdrawal Request.

Within 90 days after receiving the Part 3 Statement of Information, you must provide the Administrator with a completed Part 4: Application for Withdrawal Based on Shortened Life Expectancy Under Manitoba Pension Legislation (“Part 4 Application”).

If you qualify for the withdrawal, the Administrator must pay the balance of your plan to you within 90 days after receiving the completed Part 4 Application.

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**Part 1: Withdrawal Request**

**Annuitant Information**

Name of Annuitant

Mailing Address

Apt. No.

City

Province

Postal Code

Home Telephone No.

Fax No.

E-Mail Address (optional)

Annuitant’s Social Insurance No.

**To: CIBC Trust Corporation** (the “Trustee”),

**And to: CIBC Asset Management Inc.** (the “Administrator”) as the Agent for the Trustee

**Check applicable plan type (one only):**

- Renaissance Investments LIRA  
 Renaissance Investments LIF

**Re:**

\_\_\_\_\_ , \_\_\_\_\_  
(insert name of Annuitant)

(insert account number)

**Renaissance Documentation Package: Withdrawal Based on Shortened Life Expectancy Under Manitoba Pension Legislation**

**To be completed by the Annuitant**

1. **You, the undersigned**, hereby certify that you are the Annuitant of the above-mentioned LIRA or LIF (the "Plan").

**Check only one:**

You are a "**member-owner**" (meaning that you were a member of the pension plan from which the Locked-In Funds in this Plan originated). If so, you must complete **Certification by Annuitant regarding spouse/common-law partner in Section 2** below.

**OR**

You are not a member-owner (meaning that you obtained the Locked-In Funds under a division of property after the breakdown of a spouse/common-law partner relationship or as a spouse/common-law partner death benefit).

2. Certification by Annuitant regarding spouse/common-law partner: You certify that

You **do not** have a spouse/common-law partner within the special meaning of these terms set out below, or if you do, at this time you **are** living separate and apart from your spouse/common-law partner by reason of a breakdown of your relationship.

**OR**

You **do** have a spouse/common-law partner within the special meaning of these terms set out below, and at this time you are not living separate and apart from your spouse/common-law partner by reason of a breakdown of your relationship.

The Manitoba Pension Regulation defines a "spouse" as the individual who is married to you and the Manitoba Pension Act defines common-law partner as:

- a) a person who, with you has registered a common-law relationship under 13.1 of *The Vital Statistics Act*, or
- b) a person who, not being married to you, cohabited with you in a conjugal relationship and has
  - i) for a period of at least three years, if either of you is married; or
  - ii) for a period of at least one year, if neither of you is married.

Name of Spouse/Common-law Partner

\_\_\_\_\_

3. **You attach a completed** Part 2 Certification by Physician **certifying that you have a life expectancy** that has been shortened by reason of a terminal illness or disability to less than two years.

**You request the Administrator as indicated above to:**

**Check one:**

- Transfer proceeds of your Plan to an existing RRSP/RRIF, account number \_\_\_\_\_, or
- Transfer proceeds of your Plan, less any applicable withholding taxes, to an existing non-registered account, account number \_\_\_\_\_, or
- Issue a cheque for the amount of the withdrawal from your Plan, less any applicable withholding taxes.

**Check one:**

Partial Withdrawal/Transfer: \$ \_\_\_\_\_ or  Full Withdrawal/Transfer

You make this request under the provision that you have a life expectancy that has been shortened by reason of a terminal or disability to less than two years.

If you have indicated above that you have a spouse/common-law partner, you consent that the Administrator can provide the Part 1 Withdrawal Request along with the Part 3 Statement of Information.

\_\_\_\_\_  
Date (mm/dd/yyyy)

\_\_\_\_\_  
Signature of Annuitant

Accepted by \_\_\_\_\_  
(insert title of person signing)

for Administrator CIBC Asset Management Inc.

\_\_\_\_\_  
Date (mm/dd/yyyy)

**Renaissance Documentation Package: Withdrawal Based on Shortened Life Expectancy Under Manitoba Pension Legislation**

**Part 2: Certification by Physician for a Withdrawal**

Note: The Annuitant of the LIRA or LIF, as applicable, cannot complete the Physician's Certification.

You, the physician, are required to complete the Physician's Certification below, if you are willing, in order to provide the necessary certification for the purposes of processing an application by the Annuitant of a LIRA or LIF to withdraw money from the plan.

**Physician's Certification**

I am a physician licensed to practice medicine in Canada and in my opinion \_\_\_\_\_,  
Print the name of the Annuitant  
(same as the person identified in Part 1 Withdrawal Request)  
has a life expectancy that has been shortened by reason of a terminal illness or disability to less than two years.

Physician's Name		Physician's Telephone No.	
Physician's Address		City	Postal Code
		Province	

\_\_\_\_\_  
Date (mm/dd/yyyy) Signature of Physician

**Part 3: Statement of Information**

The information below is to be provided within 60 days after the Administrator receives the completed Part 1 Withdrawal Request

- to the Annuitant,
- and in the case of an Annuitant who is a member-owner with a spouse/common-law partner, to that spouse/common-law partner.

Annuitant's Name	LIRA or LIF (the "Plan") Account No.
Date of Part 1 Withdrawal Request	The balance of the Plan as of date of Part 1 Withdrawal Request
	\$
Date of Statement of Information (mm/dd/yyyy)*	By
	CIBC Asset Management Inc.

\*Note: The Administrator must receive the completed Part 4 Application and spousal/common-law partner consent/waiver as applicable, within 90 days from the Date of this Part 3 Statement of Information.

**Part 4: Application for Withdrawal**

Date of Part 3 Statement of Information  
\_\_\_\_\_

You, \_\_\_\_\_ the Annuitant, hereby make an application for the withdrawal further to the attached Part 1 Withdrawal Request dated \_\_\_\_\_.

If you indicated in Part 1 Withdrawal Request that you have a spouse/common-law partner, with whom you are not living separate and apart by reason of a breakdown of your relationship, you confirm that you (i) provided your spouse/common-law partner a copy of the Part 3 Statement of Information; (ii) attach a signed Form 7 "Consent To Withdrawal From LIRA or LIF Due To Terminal Illness Or Disability"; and (iii) if the Plan is a LIRA, attach a signed Form 5 "Waiver of 60% Joint Pension Entitlement For Pension Plan Or Locked-In Retirement Account".

\_\_\_\_\_  
Date (mm/dd/yyyy) Signature of Annuitant

Accepted by (title of person signing) for Administrator CIBC Asset Management Inc.	Date (mm/dd/yyyy) For internal use only: date balance/partial balance paid to Annuitant
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