

# Financial Hardship Unlocking – FORM FHU 3

Application for First and Last Months' Rent for a Principal Residence

Approved by the Superintendent of Financial Services pursuant to the *Pension Benefits Act,* R.S.O. 1990, c. P.8.

## Only use this form for Applications in 2014

In this form, "PBA" refers to the *Pension Benefits Act*, R.S.O. 1990, c. P.8., and "Regulation" refers to Regulation 909, R.R.O. 1990

This Application may only be used to apply for money in your locked-in account that was earned in Ontario.

#### Submit your completed Application to the financial institution that administers your locked-in account. Do not submit it to the Financial Services Commission of Ontario (FSCO).

NOTE: Please read the User's Guide to ensure this Application is filled out completely and correctly.

Use this Application to apply to withdraw money from an Ontario locked-in retirement account, life income fund or locked-in retirement income fund (referred to in this Application as a locked-in account) based on financial hardship to pay first and last months' rent for your principal residence.

You cannot apply to withdraw money from this locked-in account under the category of first and last months' rent more than one time during a calendar year.

You must apply to withdraw at least \$500 and cannot apply to withdraw more than the maximum amount permitted by regulation.

If your application is approved, the money will be paid to you in one lump sum. The money cannot be paid out in any other interval, nor transferred to a Registered Retirement Savings Plan (RRSP) or Registered Retirement Income Fund (RRIF). Also, any amount you withdraw from your account cannot subsequently be redeposited in any locked-in account.

Please be aware that the amount that is approved will be reduced by the amount of tax that is required to be withheld. There may be additional amounts that may be deducted. You should ask your financial institution for an estimate of the amount that will be deducted before you decide how much money you want to apply to withdraw, but you cannot apply for an amount greater than the maximum amount permitted by Regulation.

Any withdrawal from your locked-in account may affect your eligibility for certain government benefits. To find out more, contact the government department or agency that provides these benefits.

When money is withdrawn from an Ontario locked-in account, the money will lose the creditor protection provided by the PBA and Regulation. In addition, any withdrawal you make from your locked-in account will decrease the amount of retirement income you receive or will receive in the future.

This form, including the required information, signatures, and supporting documents, is required by the Regulation, Schedule 1, Schedule 1.1, Schedule 2, or Schedule 3 to the Regulation, as applicable.

Note: Under privacy legislation, it is the responsibility of your financial institution to advise you of the purposes for which personal information is collected, used or disclosed. Your financial institution and its representatives are required to comply with all applicable privacy requirements in dealing with information required to be provided as part of this Application.

### Part 1 Information About the Owner of the Ontario Locked-in Account

#### 1. Provide the following information about yourself:

Last Name		First Name		Middle Name		Date of Birth (yyyy /mm / dd)	
Mailing Address – Street Number and Name							Suite No.
City	Province	Province/State		Postal Code/Zip Code Co		Count	ry
Contact Number F		Fax Number			E-mail Address		
( )		( )					

#### 2. Provide the following information about your Ontario locked-in account from which you are applying to withdraw money.

Name of Financial Institution and Policy Number or Account Number of your Ontario locked-in account					

# 3. Please see the User's Guide for the definition of "spouse" under the PBA. If you have a spouse on the date you sign this Application, provide the following information about your spouse:

Last Name	First Name		Middle Name		Date of Birth (yyyy/mm/dd)		
Spouse's Mailing Address  Street Address	your Mailing Address, or:				Suite No.		
City P	rovince/State	Postal Code	/Zip Code	Country			
Contact Number 🗌 Same as your contact number or							
( )							

### Part 2 First and Last Months' Rent for a Principal Residence

While either you or your spouse may require money to pay first and last months' rent, the rent must be for your principal residence.

1. Other than this application, have you applied to withdraw money from this locked-in account based on the need for first and last months' rent for a principal residence at any time during 2014?

Yes
No

If you answered "Yes", you cannot apply again based on first and last months' rent from this account this year. You must wait until 2015 to apply under this category and use the 2015 application form.

#### 2. What is the maximum amount you may withdraw?

The maximum amount you can withdraw is the smaller of:

a) 5% of the Year's Maximum Pensionable Earnings (YMPE) for 2014, which is:

#### AND

- b) The amount required for the first and last months' rent
- c) Enter the smaller of 2a and 2b this is the maximum amount you may withdraw:

#### 3. How much money are you applying to withdraw from this locked-in account?

Note that you are not permitted to apply to withdraw an amount:

- greater than your locked-in account balance;
- greater than the maximum amount you are allowed to withdraw (box 2c); or
- less than \$500

# Note: If your application is approved, the amount you have applied to withdraw will be reduced by withholding tax and other additional amounts that may be deducted.

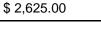
#### 4. What is the address of the principal residence you and your spouse (if applicable) want to rent?

Street Number and Name	Suite No.		
City	Province/State	Postal Code/Zip Code	Country

#### Additional documents required:

A copy of the rental agreement, if it is available. Please see the User's Guide for more details.

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\$

### Part 3 Certification by the Owner of the Locked-in Account

Please read the User's Guide before you complete the Certification.

This Certification will not be valid for the purpose of your application if it is dated more than 60 days before the date the financial institution that administers your Ontario locked-in account receives this completed application.							
	Certification						
out in Part 2 of	ed-in account identified in Part this Application. I understand the account and additional ar	I that the amount the	at is approved will be reduc	ed by withholding tax pay			
	the date I sign this Part: ne of the boxes below.)						
🗌 l have a sp	ouse*, and my spouse consen	ts to the withdrawal	of money from the locked-i	in account.			
(If you che	eck this box, you will need yo	our spouse to com	plete Part 4 of this Applic	cation.)			
	ouse*, but on the date I sign th I relationship.	nis Attestation, I am	living separate and apart fr	om my spouse as a result	of a breakdown in		
	ouse*, but none of the money my past or current employmen				enefit provided in		
🗌 I do not ha	ve a spouse.*						
I also certify th	at:						
(a)	all of the information contained and	l in this Application ar	nd the documents that accom	pany this Application is accu	urate and complete;		
(b)	I have not previously applied	d to withdraw mone	y for first and last months' re	ent in 2014 from this locke	ed-in account.		
I understand th	nat:						
(a)	any money withdrawn from t Benefits Act from execution,				ntario <i>Pension</i>		
(b)	(b) it is an offence under the Ontario Pension Benefits Act to provide information in this Application which is not true, accurate and complete, punishable on conviction by a maximum fine of \$100,000 for a first conviction, and a maximum fine of \$200,000 for any subsequent conviction; and						
(c)	(c) it is a criminal offence under the federal <i>Criminal Code</i> for anyone to knowingly make or use a false document with the intent that it be acted on as genuine, punishable on conviction by a maximum term of 10 years imprisonment.						
*Please refer to	the User's Guide for the defin	iition of "spouse" un	der the Ontario Pension Be	enefits Act.			
The owner of	the locked-in account must s	sign this Certificat	ion in the presence of an	adult witness.			
	Signature of Owner		Signature of Witnes		Date Signed (yyyy/mm/dd)		
Witness Inform	nation						
Last Name		First Name		Middle Name			

### Part 4 Consent of the Owner's Spouse to the Withdrawal

This Part needs to be completed **only** if the owner of the locked-in account attests in Part 3 of this Application that the owner has a spouse who consents to the withdrawal of money from the account. The owner of the locked-in account cannot complete this Part.

If you are the spouse of the owner of the locked-in account and you are asked to consent to this Application to withdraw money from the owner's account, you should get advice from a lawyer about your rights and the legal consequences of signing the Consent below. You are not obligated to sign the Consent below.

If you wish to consent, please read the Consent below. If you are satisfied that the Consent correctly describes your situation, in the presence of a witness (an adult who is not the owner of the locked-in account), please sign, date and fill in the required information, and have your witness sign the Consent.

# The Consent will not be valid for the purposes of this Application if the Consent is dated more than 60 days before the date the financial institution receives it.

		C	Consent				
l am	the spouse of the owner of the locked-	in account identified	in Part 1 of this Applicatio	n.			
l une	derstand that:						
(a)	the owner is making an Application to withdraw money from the locked-in account, and that the owner cannot withdraw the money from the locked-in account without my consent;						
(b)	as long as this money is kept in the locked-in account, I may have a right to a share of this money if there is a breakdown in our spousal relationship or if the owner dies; and						
(c)	if any money is withdrawn from the lo	cked-in account, I m	nay lose any right that I hav	ve to a share of the m	oney withdrawn.		
l cor	nsent to the owner's application to withd	raw money from the	e locked-in account.				
l giv	e my consent by signing and dating this	Consent in the pre	sence of a witness.				
The	Owner's Spouse must sign this Con	sent in the presen	ce of the witness.				
	Signature of Owner's Spouse		Signature of Witne	SS	Date Signed (yyyy/mm/dd)		
Spo	use Information						
Last Name First Name		First Name		Middle Name			
Witn	ess Information						
Last I	Name	First Name		Middle Name			