

# INTERNATIONAL TAX (FATCA/CRS) BENEFICIARY SELF CERTIFICATION FORM

Throughout this form, "Empire Life" means The Empire Life Insurance Company.

You must provide proof of residency status by attaching a photocopy of government issued identification. Acceptable forms of identification include a driver's licence or passport.

For more information on the Foreign Account Tax Compliance Act (FATCA) or the Common Reporting Standard (CRS), refer to the CRA website - [www.cra-arc.gc.ca](http://www.cra-arc.gc.ca) and search "FATCA" or "CRS".

Policy/Contract Information		
Name of beneficiary (first, middle, last)		Policy/Contract number(s)
Address (number, street)		City
Province/State/Country	Postal/zip code	Phone number
<b>Where do you reside for tax purposes? (check all that apply)</b>		
<input type="radio"/> Canada		
<input type="radio"/> U.S. (resident or citizen) – Tax Identification Number (TIN) _____		
If you do not have a TIN from the U.S. have you applied for one? <input type="radio"/> yes <input type="radio"/> no		
<input type="radio"/> Other – specify country _____ TIN _____		
<b>If you do not have a TIN, specify the reason:</b>		
<input type="radio"/> I will apply or have applied for a TIN but have not yet received it.		
<input type="radio"/> My jurisdiction of tax residence does not issue TINs to its residents.		
<input type="radio"/> Other – specify reason _____		

Verification of Residency Status
I have enclosed a photocopy of the following government issued document to verify my residency status:
<input type="radio"/> Drivers licence <input type="radio"/> Passport <input type="radio"/> Other _____

Beneficiary Certification and Signature	
I <b>certify</b> that my answers are true to the best of my knowledge and belief, and that they may be relied upon by Empire Life.	
Signature of beneficiary <b>X</b>	Date (dd/mmm/yy)