

1. Name of Investor

S.I.N. (optional/for identification)

2. Name of Investor

S.I.N. (optional/for identification)

Address (Single address for all joint account holders or for an individual account holder)

B. Investor/s Authorization

1. I/We authorize

Altimum Mutuals Inc.

(Name of the Dealer)

(the "Dealer") to give instructions on my/our behalf to the fund company or companies that I/we have selected (each a "Fund Company") and to sign any relevant documents associated with (a) purchases, (b) switches, and (c) redemptions for me/us in accordance with my/our specific instructions for each transaction. This Limited Authorization is intended to create a simple form of limited agency. It does not give the Dealer unlimited authority or the right to conduct discretionary trading on my behalf. In the case of joint account holders we acknowledge that the Dealer will only execute transactions on our behalf in accordance with the standing authorization instructions in place on our joint account at the time of each trade which will be binding on all joint account holders.

2. Until revoked pursuant to the provisions of Section C below, this Limited Authorization is authorized for use with respect to all current and future accounts serviced through the Dealer with a Fund Company: (a) conducted in my name (if this limited authorization is granted by an individual only), or (b) conducted in our joint names (if this limited authorization is granted by joint account holders).

3. I/We authorize the Dealer to provide copies of this Limited Authorization and/or the Instruction Confirmation Notice ("ICN") which relates to this Limited Authorization to a Fund Company for the purpose of executing authorized transactions on my/our behalf with the Fund Company.

4. The instructions provided to my/our Dealer under the authority of this Limited Authorization shall have the same validity as if I/we had provided signed written instructions to my/our Dealer through the registered representative of the Dealer ("Dealer Representative" referred to in Section E below or an alternate designated by the Dealer) or the Fund Company.

5. I/We acknowledge that I/we am/are liable to the Dealer and the Fund Company for all fees and commissions applicable to any transactions executed on my/our behalf as set out in the current prospectus of the mutual fund concerned. For joint accounts each of the joint account holders is jointly and severally liable for such fees and commissions.

6. Under my/our authority my/our Dealer can give instructions to a Fund Company to pay the proceeds of a redemption to ANY of:

- me/us at my/our address currently on file with the Fund Company unless otherwise advised in writing;
- my/our financial institution using account information provided to my/our Dealer (name, branch, account #);
- the trustee of my/our registered plan/s (e.g. RRSP, RRIF, etc.);
- the trustee of my/our spousal or common law partner registered plan/s (e.g. RRSP);
- my/our Dealer in trust;
- another dealer in trust;
- another Fund Company in trust.

7. This Limited Authorization does not revoke any other Limited Authorization or power of attorney that I/we may have granted to another dealer or person/s, whether signed individually or jointly with any other person/s and whether executed prior to or subsequent to the date of this Limited Authorization, unless it specifically revokes it.

8. I/We agree that this Limited Authorization and all documents relating thereto be drawn up in the English language only. J'accepte/nous acceptons que la présente autorisation limitée et tous les documents s'y rapportant soient rédigés en anglais seulement.

C. Expiration of Limited Authorization

This Limited Authorization, and the ability to utilize the ICN, will continue indefinitely and will expire immediately upon the occurrence of any of the following events:

- receipt by the Dealer of written notice of revocation from me/us of this Limited Authorization (in the case of a joint account, notice of revocation can be given by any of the joint account holders);
- the signature by me/us of another Limited Authorization in favour of the same Dealer;
- the Dealer Representative leaving the Dealer;
- a change in my/our Dealer or Dealer Representative for my/our account/s;
- the Dealer or Dealer Representative ceasing to be authorized to engage in business by their respective governing regulatory authorities;
- bankruptcy of the Dealer, the Dealer Representative, or any account holder;

- the death of an account holder (whether of an individual account or any one of the joint account holders) or the death of the Dealer Representative;
- written notice to, or receipt of, evidence by the Dealer of the mental incapacity of an account holder (whether of an individual account or any one of the joint account holders) or the mental incapacity of the Dealer Representative.

The Dealer Representative referred to in this section is the individual referred to in Section E below.

D. Investor/s Acknowledgement and Consent

I/We acknowledge that I/we have read and understand the provisions of this Limited Authorization and the Additional Information which is part of this form. I/We consent to the use of my/our personal information for administrative and processing purposes.

Investor Signature _____

Date _____

Witness _____

Signature guarantee (if applicable) _____

Investor Signature _____

Date _____

Witness _____

Signature guarantee (if applicable) _____

Note: The Dealer Representative may witness the signature/s of the Investor/s, but he/she may not guarantee the signature/s of the Investor/s.

E. Dealer Representative Confirmation and Acknowledgement

I, the undersigned, _____
(Dealer Representative)

confirm: (a) that I am the Dealer Representative on record for the Investor/s named in section A above; (b) that I have reviewed the provisions of this Limited Authorization and the Additional Information at the end hereof with the Investor/s and acknowledge that I am bound by its terms. In the case of a joint account I will only implement instructions given to me in accordance with the standing authorization instructions applicable to the joint account at the time of each trade.

Dealer Representative Signature 7767

Date _____

Dealer Representative Code _____

F. Dealer Acknowledgement and Indemnity

We, the undersigned Altium Mutuals Inc.
(the Dealer appointed under Section B above)

hereby acknowledge and accept the authority given under this Limited Authorization to take instructions from the Investor/s named in Section A above and to implement and convey such instructions to the Fund Company concerned on behalf of the Investor/s. We agree to indemnify the Fund Company and the mutual funds concerned against any and all claims, liabilities, damages or costs, including legal fees, that may arise as a result of the Fund Company acting on instructions provided under the authority of this Limited Authorization. We also agree to indemnify the Investor/s, the Fund Company and the mutual funds concerned against any and all claims, liabilities, damages or costs, including legal fees, that may arise as a result of us or any of our dealer representatives providing any instructions which are not authorized by, or in accordance with, the Investor/s instructions. We agree that delivery of a copy of this Limited Authorization or the ICN to a Fund Company, shall be binding on us and shall constitute a warranty by us to the Fund Company and the mutual funds concerned that this Limited Authorization is current and enforceable at the time of such delivery. We also undertake to retain a record of all instructions received by us from the Investor/s for subsequent review by a Fund Company, the Investor/s or the appropriate securities regulatory authorities. This agreement is binding on us and on our successors. **Through the use of the logo and reference of The Investment Funds Institute of Canada ("IFIC") at the foot of each page of this Limited Authorization we warrant that it is identical to the Limited Authorization form approved for use by IFIC.**

Altium Mutuals Inc.

Signature of authorized Officer of Dealer 7767

Dealer Name 94 Barbican Trail

Dealer Code _____

Dealer Address St. Catharines, ON L2T 4A8

Name _____

Title _____

Date _____

Additional Information

1. By signing this Limited Authorization, you are authorizing the Dealer to arrange for the execution on your behalf, on all current and future accounts that you conduct with the Dealer (either as individual or by the same joint account holders) of orders for: (a) purchases, (b) switches or (c) redemptions of mutual fund securities as set out in the current prospectus of the mutual fund concerned.
2. This Limited Authorization allows your Dealer to relay your instructions to a Fund Company. Your Dealer and its representatives may not authorize any transactions on your behalf without your prior specific instructions in each case.
3. Your Dealer is required to keep a record of your instructions for each transaction in your file. We recommend that you also keep a record of all instructions you give to your Dealer.
4. You should ensure that the trade confirmations that you receive correspond to your instructions.
5. When you provide instructions to your Dealer for the purchase of securities you must clearly indicate the purchase option you have selected as set out in the current prospectus of the mutual fund concerned.
6. When you give your Dealer instructions for the redemption of any mutual fund securities, you must also include details of how the proceeds should be dealt with. The options for payment are set out in paragraph 6 of section B of the Limited Authorization.
7. A Fund Company or your Dealer may, in its sole discretion, refuse to process trade instructions given under the authority of this Limited Authorization.
8. For information on the privacy policies and procedures of the Fund Company and Dealer please contact them directly.

Bankruptcy of Dealer:

1. In the event that your Dealer becomes bankrupt, you may experience significant delays in accessing your securities and you may not receive their full value.
2. Should your Dealer go bankrupt, a trustee in bankruptcy (the "trustee") will determine whether your securities are "customer name securities" under the *Bankruptcy and Insolvency Act* (the "Act"). If your securities are determined to be customer name securities, the trustee will so advise you and, provided you are not indebted to your Dealer, the trustee is obliged to deliver your securities to you.
3. If your securities are not considered to be customer name securities under the Act, the securities will be placed in a pool together with those of other similar investors and shared proportionately among all of you.
4. Under the Act, "customer name securities" refers to securities held in your name by the Dealer, or in the Dealer's name held on your behalf and registered in your name, or which are in the process of being registered in your name. This does not include securities that are registered in your name which, by endorsement or otherwise, are in negotiable form. It is currently unclear whether by signing this Limited Authorization you will render your securities "negotiable" or "endorsed", thereby causing them to lose their status as "customer name securities".

Fees and Commissions:

1. You may have to pay a commission to your Dealer for any orders for purchase/s or switch/es. This commission may be negotiable.
2. Charges may also apply to redemptions depending on the purchase option you originally selected.

The trade instructions conveyed to the Fund Company with this ICN are given under the authority and upon the terms and conditions of the Limited Authorization Form ("LAF") signed by the following parties:

Investor Signature_____
Date_____
Print Name_____
Investor Signature_____
Date_____
Print Name_____
Dealer Representative Signature_____
Date**7767 -**_____
Print Name_____
Dealer Representative Code_____
Dealer Signature_____
Print Name_____
Date

The above parties agree that the Dealer may send a copy of this ICN to a Fund Company in lieu of providing it with a copy of the complete LAF concurrently with the trade instructions of the Investor/s. By providing a copy of this ICN to a Fund Company, the Dealer warrants to the Fund Company that the LAF is current and enforceable at the time of such delivery and that it has not been revoked, replaced or amended. The Dealer undertakes to provide the Fund Company with a copy of the signed LAF if so requested. The parties agree that the trade instructions submitted together with a copy of this ICN will have the same force and effect as if a copy of the LAF had accompanied such trade instructions.

Edith G. Reid / President and Chief Compliance Officer

94 Barbican Trail, St. Catharines, ON L2T 4A8 / tel. (905) 680-8544 fax (905) 680-8546 e-mail: edith@altimum.ca