

Ontario Securities Commission

FORM 33-109F1

**NOTICE OF END OF INDIVIDUAL REGISTRATION OR PERMITTED INDIVIDUAL STATUS**

Unofficial consolidation current to 2022-06-06.

This document is not an official statement of law or policy and should be used for reference purposes only.

FORM 33-109F1

**NOTICE OF END OF INDIVIDUAL REGISTRATION  
OR PERMITTED INDIVIDUAL STATUS**

(section 4.2)

**WARNING - It is an offence to knowingly give false or misleading information to the regulator or the securities regulatory authority.**

**CERTIFICATION**

I, on behalf of the firm, certify to the regulator or, in Québec, the securities regulatory authority in each jurisdiction where the firm is submitting this form and to any applicable self-regulatory authority (SRO) that

- I have read this form and understand all matters within this form, including the questions, and
- to the best of my knowledge and after reasonable inquiry, all of the information provided on this form is true and complete.

NRD format:

- I, the authorized firm representative, am making this submission under authority delegated by the firm. By checking this box, I certify that the firm
- (a) provided me with all of the information on this form, and
  - (b) makes the certification above.

Non-NRD format:

By signing below, I, on behalf of the firm, make the certification above.

Name of firm \_\_\_\_\_

Name of authorized signing officer or partner \_\_\_\_\_

Title of authorized signing officer or partner \_\_\_\_\_

Signature of authorized signing officer or partner \_\_\_\_\_

Date signed \_\_\_\_\_

(YYYY/MM/DD)

## GENERAL INSTRUCTIONS

Complete and submit this form to notify the relevant regulator(s) or, in Québec, the securities regulatory authority, or self-regulatory organization (SRO) that a registered individual or permitted individual has left their sponsoring firm or has ceased to act in a registerable capacity or as a permitted individual.

As set out in section 1.1 of National Instrument 33-109 *Registration Information*, “cessation date” means the last day on which an individual had authority to act as a registered individual on behalf of their sponsoring firm or the last day on which an individual was a permitted individual of their sponsoring firm.

### How to submit the form

Submit this form at the National Registration Database (NRD) website in NRD format at [www.nrd.ca](http://www.nrd.ca).

If you are relying on the temporary hardship exemption in section 5.1 of National Instrument 31-102 *National Registration Database*, you may submit this form in a format other than NRD format.

### When to submit the form

As set out in paragraph 4.2(2)(a) of National Instrument 33-109 *Registration Information*, you must submit the responses to Items 1, 2, 3 and 4 within 15 days of the cessation date.

If you are required to complete Item 5, you must submit those responses within 30 days of the cessation date. If you are submitting the responses to Item 5 in NRD format, after Items 1 to 4 have been submitted at NRD, use the NRD submission type called “Update/Correct Cessation Information” to complete Item 5 of this form.

### Item 1 Former sponsoring firm

1. Name \_\_\_\_\_

2. NRD number \_\_\_\_\_

### Item 2 Individual

1. Name \_\_\_\_\_

2. NRD number \_\_\_\_\_

### Item 3 Business location of the individual

1. Business location address \_\_\_\_\_

2. NRD number \_\_\_\_\_

### Item 4 Date and reason for cessation

1. Cessation date \_\_\_\_\_  
(YYYY/MM/DD)

The above date is the last day on which the individual had authority to act as a registered individual on behalf of the sponsoring firm, or the last day on which the individual was a permitted individual of the sponsoring firm.

2. Reason for cessation (check one):

Resigned - voluntary

Resigned - at the firm's request

Terminated in good standing

Terminated for cause

Completed temporary employment contract

Retired

Deceased

Other

If "Other", explain:

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**Item 5      Details about the cessation**

Complete Item 5 except if the individual is deceased. In the space below

- state the reason(s) for the cessation and
- provide details if the answer to any of the following questions is "Yes".

[For NRD format only:]

This information will be disclosed within 30 days of the cessation date

Not applicable: individual is deceased

Answer the following questions to the best of the firm's knowledge.

In the past 12 months:	Yes	No
1. Was the individual charged with any criminal offence?	<input type="checkbox"/>	<input type="checkbox"/>
2. Was the individual the subject of any investigation by any securities or financial industry regulator?	<input type="checkbox"/>	<input type="checkbox"/>
3. Was the individual subject to any significant internal disciplinary measures at the firm or at any affiliate of the firm related to the individual's activity as a registrant?	<input type="checkbox"/>	<input type="checkbox"/>

- |   |                          |                          |
|---|--------------------------|--------------------------|
| 4. Were there any written complaints, civil claims and/or arbitration notices filed against the individual or against the firm about the individual's securities-related activities that occurred while the individual was registered or a permitted individual authorized to act on behalf of the firm?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Does the individual have any undischarged financial obligations to clients of the firm?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Has the firm or any affiliate of the firm suffered significant monetary loss or harm to its reputation as a result of the individual's actions?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Did the firm or any affiliate of the firm investigate the individual relating to possible material violations of fiduciary duties, regulatory requirements or the compliance policies and procedures of the firm or any affiliate of the firm? Examples include making unsuitable trades or investment recommendations, stealing or borrowing client money or securities, hiding losses from clients, forging client signatures, money laundering, deliberately making false representations and engaging in undisclosed outside activity. | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Did the individual repeatedly or materially fail to follow compliance policies and procedures of the firm or any affiliate of the firm?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Did the individual engage in discretionary management of client accounts or otherwise engage in registerable activity without appropriate registration or without the firm's authorization?  | <input type="checkbox"/> | <input type="checkbox"/> |

Reasons/Details: \_\_\_\_\_

**Item 6**      [*repealed*]

**Item 7**      [*repealed*]

**Item 8**      [*repealed*]

**Schedule A**  
*[repealed]*