

INFORMATION BOX			
Annual interest rates	Regular Rates (in effect at the issuance of the card unless a promotional rate applies)		
	Cards	Purchases	Balance transfers and cash advances
	Regular Rates: mycredit, Edition, Allure, MC1, ECHO cashback, Escapade, OVATION Gold, Platinum, World, World Elite	20.99%	22.49%
	Reduced Rates: Allure, Edition	14.5%	14.5%
	Regular Rates: Syncro	Prime rate + 4% (minimum rate : 8.9%)	Prime rate + 8% (minimum rate : 12.9%)
	The prime rate is the annual variable interest rate that the bank publishes from time to time which is used to determine the interest rate for on demand loans granted in Canadian dollars. To find out the prime rate, dial 1-888-622-2783 (toll-free) or visit nbc.ca. The minimum rates indicated above are the interest rates in effect on September 1, 2021.		
	Increased Rates The interest rates will increase when the minimum payment is not made by the due date indicated on the monthly statement twice during any 12 month period. Any missed payment during a 12 month period is counted, even if the missed payment has already been counted to increase the rates in the past or has occurred during such a period. For all cards (except the Syncro card): the interest rates will increase to 25.99% for purchases and to 27.49% for balance transfers and cash advances. For the Syncro card: the interest rates in effect when you missed your 2 nd payment will be increased by 9%. The increased rates will take effect on the 3 rd statement period following the 2 nd missed payment and will apply to the account balance until the minimum payment is made by the due date indicated on the monthly statement during 9 consecutive months. After this period, the regular rates will apply, regardless of whether a promotional or reduced rate was in effect prior to the rate increase.		
Interest-free/grace period	At least 21 days on purchases if you pay your full balance by the due date indicated on your monthly statement (no grace period applies to balance transfers and cash advances).		
Minimum payment	If your account balance is lower than \$10, you must pay the entire balance. If you reside in the province of Quebec, your minimum payment will correspond to 5% of the credit card account balance plus any overdue payment or \$10, whichever amount is higher. If you reside outside of Quebec, your minimum payment represents 2.5% of the credit card account balance plus any overdue payment or \$10, whichever amount is higher.		
Foreign currency conversion	<ul style="list-style-type: none"> - A transaction made in a foreign currency will appear on your statement in Canadian dollars. - To convert the amount of a transaction in a foreign currency to Canadian dollars, we use the same daily exchange rate as <i>Mastercard Worldwide</i>. The conversion takes place on the date the transaction is completed or, at the latest, on the date the transaction is posted to your account. A fee of 2.5% will then be charged on the amount converted in Canadian dollars. - Please note that a transaction includes a debit or a credit to your account. Therefore, the applicable exchange rate may be different depending on the date and time of the transaction. 		
Annual fees	Cards	Main card	Additional card
	mycredit, MC1, Edition and Allure with CashBack, regular interest rate	\$0	\$0
	ECHO cashback, Edition and Allure with CashBack, reduced interest rate	\$30	\$0
	Escapade, Edition and Allure with the À la carte Rewards Plan, regular interest rate	\$30	\$0
	Edition and Allure with the À la carte Rewards Plan, reduced interest rate	\$60	\$0
	Syncro	\$35	\$0
	OVATION Gold	\$115	\$35
	Platinum	\$89	\$35
	World	\$115	\$35
	World Elite	\$150	\$50
	Annual fees will appear on the 2 nd statement following the issuance of the card, and once a year thereafter, on the anniversary of this 2 nd statement, whether the card is activated or not.		
Other fees	Overlimit fee: › \$0 (Québec) › \$29.00 (Outside of Quebec) Fee charged once each statement period if the balance exceeds the credit limit on the billing date (1).		
(1) Not applicable for the World Elite card.			

Credit Card Application¹

202109

LTAA

Promotional code

Request for an additional card on existing account

Correspondence: E F

Please print in black ink

Primary cardholder's existing National Bank credit card number: 5 2 5 8

1. Personal Information of Primary Cardholder

All fields are mandatory unless otherwise indicated

<input type="checkbox"/> Mr. First name and last name <input type="checkbox"/> Miss <input type="checkbox"/> Mrs.	Date of birth <input type="text"/>	Social insurance number ² (optional) <input type="text"/>
Telephone number at home <input type="text"/>	Telephone account in the name of: <input type="checkbox"/> Primary cardholder <input type="checkbox"/> Other (specify):	Occupation <input type="text"/>

Address (Civic number and Street) Apt. City Province Postal code

2. Personal Information of Authorized User

<input type="checkbox"/> Mr. First name and last name <input type="checkbox"/> Miss <input type="checkbox"/> Mrs.	Date of birth <input type="text"/>
Address (Civic number and Street) Apt. City Province Postal code <input type="text"/>	

Relationship with Primary cardholder Telephone number at home Telephone number (work/other)

3. Credit Card Payment Protection Plan

To enroll in Credit Card Payment Protection Plan and protect my credit card balance, I must complete the enrollment form on pages 4 and 5.

4. Balance Transfers

 I request the transfer of the credit card balances listed below to my National Bank credit card account.³
This section only applies to credit cards not issued by the bank. Each amount indicated below cannot be less than \$250.

Name of the issuer	\$ Amount	Card number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of the issuer	\$ Amount	Card number
<input type="text"/>	<input type="text"/>	<input type="text"/>

5. Important • Mandatory Signature

I request that an additional credit card be issued in the name of any authorized user identified in this credit application and who has authorized me to request a card on his behalf. I acknowledge having read the general conditions of this credit application and I accept them. I understand that I will be the only person responsible for the repayment of all amounts due to the bank resulting from the use of the credit card account, including transactions made by an authorized user.

I confirm the accuracy of the information provided in this credit application. I give my consent regarding the collection, use and disclosure of my personal information as described in the general conditions, subject to my right of withdrawal. **In particular, I accept that the bank obtain credit records from credit bureaus.** I also confirm having informed the authorized user of the collection, use and disclosure of his personal information as described in the general conditions and having obtained his consent.

I understand that merchants may incur higher acceptance fees for the World and World Elite cards.

 Primary cardholder's signature Date

Reserved for the Bank:

Employee number: Advisor's name: Transit: CIS client number:

Please send the application to: Credit Card Services, 600 De La Gauchetière Street West, Suite 1569-1, Montreal, Quebec H3B 9Z9.

- Subject to credit approval by the bank.
- Disclosure of the social insurance number is optional. For information on its use by the bank, read the section entitled "Collection, Use and Communication of Personal Information" on the next page.
- Balance transfers are treated as cash advances and are subject to the cardholder agreement. In particular, interest on the cash advance amounts begins to accrue as of the cash advance date, until full payment is received. The bank reserves the right to refuse any balance transfer.

General Conditions

Responsibility of the Primary Cardholder

As the primary cardholder of the credit card account, I understand that I am responsible to the bank for all the obligations under the cardholder agreement. In particular, I am responsible for the repayment of any amount charged to my credit card account, including transactions resulting from the use of the account by an authorized user.

Cardholder Agreement

The cardholder agreement will be sent to me with my credit card. I understand that the first use of the credit card account after receipt of the agreement, a notice of modification or a notice of renewal will confirm my acceptance of the terms and conditions of the cardholder agreement.

Collection, Use and Communication of Personal Information

Collection

To offer me products and services, the bank must collect my personal information as well as the personal information of authorized users. The bank collects this information from me, from credit reporting and assessment agencies and, when needed, from other sources. These sources include other financial institutions, public registries, regulatory authorities and organizations, insurers, employers, professionals and persons given as reference.

Use

The personal information the bank collects is used primarily:

- to identify me, namely with my social insurance number if provided, to identify the authorized user and to keep our information updated
- to evaluate my financial situation and my continuing eligibility to the card, including with credit bureaus
- to provide me and the authorized user with the services related to the card on a continuing basis
- to conduct investigations and verifications necessary to protect the bank, the authorized user and myself against errors and fraud, including with respect to merchants
- to manage its risks and to respect its legal and regulatory obligations
- to preserve the integrity of the credit granting process

Disclosure

To use my personal information and, to a lesser extent, the personal information of the authorized user, for the purposes described above, the bank may communicate such information to:

- the bank's subsidiaries (to update the information, to manage risks, to ensure compliance)
- the organizations and persons identified as other sources above (identification purposes, assessment of my financial situation,

investigations, to ensure compliance and preserve the integrity of the credit granting process)

Processing and storage of personal information outside of Canada

My personal information and that of the authorized user can be processed or stored outside of Canada and could be subject to the laws and rights of access of the authorities of foreign countries, including the United States.

Marketing

Unless I instruct otherwise, the bank may use my personal information to offer me other products and services of the bank and those of its subsidiaries and select business partners*, either by mail, by phone or by electronic means (such as email) to the addresses and numbers provided by me. The bank may also disclose this information to its subsidiaries and select business partners, where legislation permits, so that they too may offer me their own products and services in the same manner. I will have the opportunity to withdraw my consent to receiving such promotional offers when I activate my card or at any time in the future. To withdraw my consent, I may call at **514-394-1427** in the Montreal area, or toll free at **1-888-622-2783**, or visit one of the bank's branches.

Additional information

I acknowledge that the cardholder agreement which will be sent to me includes additional information on the scope of my consent and the authorized user's consent as well as my rights and those of the authorized user to access and correct personal information. I undertake to communicate this information to the authorized user.

Examples of Credit Charges Calculated Over a Period of 30 Days

Annual interest rate	Average balance	
	\$500	\$3,000
8.9%	\$3.66	\$21.95
14.5%	\$5.96	\$35.75
20.99%	\$8.63	\$51.76
22.49%	\$9.24	\$55.45
25.99%	\$10.68	\$64.08
27.49%	\$11.30	\$67.78

Language

The parties have requested that this document be drawn up in English.

Les parties confirment leur volonté que le présent document soit rédigé en anglais.

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* Our select business partners are well established and carefully selected firms. The list of our select business partners and subsidiaries is available online at nbc.ca or by calling, toll free, at **1-888-622-2783**.

ENROLLMENT FORM - NEW APPLICATION

Credit Card Payment Protection Plan (CCPPP)

Please complete in block letters and in black ink

1. Personal Information of Primary Cardholder

Mr. Mrs./Ms.

Last name

First name

Date of birth (YYYY MM DD)

Primary cardholder's existing National Bank credit card number: 5258 _____

2. Eligibility

I am eligible for CCPPP if, at the time the policy takes effect, I am:

Distinction, Regular and Autonomy Plans: between 18 and 64 years of age; and
living in Canada; and
a primary cardholder of a credit card account in good standing.

65 + Plan: 65 years of age or older; and
living in Canada; and
a primary cardholder of a credit card account in good standing.

3. Enrollment

I select the following insurance plan (check a plan):

Protections for each plan are detailed on page 5.

Plans for clients between 18 and 64 years of age:

Distinction Plan \$1.20 per 100 \$ Regular Plan \$0.99 per \$100 Autonomy Plan \$0.79 per \$100

Plans for clients of 65 years of age or older:

65 + Plan
\$0.69 per \$100

If this CCPPP enrollment form is signed but no plan is chosen, the Regular plan or the 65 + plan will apply.

4. General Conditions

4.1 Insurance coverage

I apply to enroll in the in the CCPPP coverage plan selected in section 3. The CCPPP benefits may, for example, totally or partially reimburse my minimum monthly payments owing on the credit card account or the account balance, depending on the selected plan, and subject to the terms and conditions set out on the following page.

The CCPPP is optional. The insurance coverage under the CCPPP is described in detail in the insurance certificate. As the primary cardholder of the credit card account, I understand that I am the group person insured under the insurance policy.

The insurance coverage is provided by the insurer: National Bank Life Insurance Company. Premiums are imposed by the insurer.

4.2 Information shared with the insurer

I authorize the bank to share with the insurer the information it has about me that is relevant to:

- this application,
- my insurance coverage, and
- the administration of my insurance coverage.

4.3 Effective date of the insurance and payment of the premium

The CCPPP will be effective on the first day of the month following enrollment. The first premium will be charged on the monthly credit card statement that follows the effective date and calculated according to the terms and conditions of the selected plan.

I authorize the insurer to charge the amount of my insurance premium to my credit card account each month. If I have no account balance, my insurance coverage will remain active but no premium will be payable.

4.4 Cancellation of CCPPP

4.4.1 Within 30 days of enrollment

If I cancel the CCPPP within 30 days of signing this enrollment form, any premium charged to my account will be reimbursed. The insurance will then be considered never to have been in effect.

4.4.2 At any time

The events that may end my insurance coverage are described in the summary and in the insurance certificate.

I may also cancel the CCPPP at any time by contacting the insurer at 1-877-871-7500 or by sending the insurer a cancellation request as described in the summary and in the insurance certificate. Cancellation will take effect on the first day of the month following the receipt of my cancellation request, but no premium will be charged for the statement period during which I requested cancellation.

For example: I have enrolled to the CCPPP and my first premium was charged to my statement for the period of January 10th to February 9th. If I request the cancellation of the CCPPP on the 15th of May, I will be covered until the 31st of May, but no premium will be charged to my statement for the period of the month of May.

4.5 Additional information

For more information or to file a claim, I can contact the insurer at 1-877-871-7500. The CCPPP is subject to restrictions and exclusions provided in the insurance certificate. Full terms and conditions of the insurance coverage are described in the certificate of insurance which will be sent to me for review and is available at all times at <https://www.nbc.ca/personal/mastercard-credit-cards/insurance.html>.

Important: The summary, must be handed to me at the same time as I'm offered CCPPP coverage, and is available at all times at <https://www.nbc.ca/personal/mastercard-credit-cards/insurance.html>. I will also receive a copy by mail.

5. Signature

By signing this form, I:

- declare that I wish to enroll in the CCPPP insurance plan selected in section 3;
- acknowledge having read and understood the information set out in this enrollment form, in the summary that corresponds to the coverage plan I selected and in the AMF fact sheet (if I am in the province of Quebec) that I was handed out;
- confirm that all information I have provided is true and correct.

X

Primary Cardholder signature

Date (YYYY MM DD)

6. Plans Details

	Distinction Plan		Regular Plan		Autonomy Plan		65 + Plan
Age - Eligibility at enrollment	18 to 64 years old		18 to 64 years old		18 to 64 years old		65 years old and older
Premium rate for every \$100 of outstanding balance on the account, as at the monthly statement date	\$1.20 plus applicable taxes		\$0.99 plus applicable taxes		\$0.79 plus applicable taxes		\$0.69 plus applicable taxes
Protections and benefits payable							
Death	Max \$25,000	Max. \$10,000	Max. \$10,000	Max. \$10,000	Max. \$10,000	Max. \$10,000	Max. \$10,000
End of protection according to age	Up to 71 years old	From 71 to 80 years old	Up to 71 years old	From 71 to 80 years old	Up to 71 years old	From 71 to 80 years old	80 years old
Accidental death	Max. the lesser of \$50,000 or the authorized credit card limit	Max. \$10,000	Max. the lesser of \$50,000 or the authorized credit card limit	Max. \$10,000	Max. the lesser of \$50,000 or the authorized credit card limit	Max. \$10,000	Max. \$10,000
End of protection according to age	Up to 71 years old	Regardless of age	Up to 71 years old	Regardless of age	Up to 71 years old	Regardless of age	Regardless of age
Critical illness diagnosis	Max. \$25,000		Not covered		Not covered		Not covered
End of protection according to age	71 years old						
1st diagnosis of cancer	Not covered		Max. \$10,000		Max. \$10,000		Not covered
End of protection according to age			71 years old		71 years old		
Accidental dismemberment	Max. \$25,000		Max. \$10,000		Max. \$10,000		Not covered
End of protection according to age	71 years old		71 years old		71 years old		
Disability	20% of sum insured		10% of sum insured		10% of sum insured		Not covered
Monthly payment: the greater of \$10 or:	Max. \$25,000		Max. \$10,000		Max. \$10,000		
End of protection according to age	71 years old		71 years old		71 years old		
Involuntary job loss	20% of sum insured		10% of sum insured		Not covered		Not covered
Monthly payment: the greater of \$10 or:	Max. \$25,000		Max. \$10,000				
End of protection according to age	65 years old		65 years old				
Life events	\$100 by event		Not covered		Not covered		Not covered
End of protection according to age	Max. 1 event / year						
	71 years old						

7. Reserved for the bank

I certify that I have given the client the summary according to their province of residence and the AMF fact sheet (Quebec only), in accordance with the choice of coverage.

Employee number

Advisor's first and last name

Transit