

ScotiaOnline Application

Your Personal Information

Name _____ SIN # _____

Address _____

Do you have a Scotiabank card? No Yes Card # _____

Date of birth _____ / _____ / _____ Mother's maiden name _____
(month) (day) (year)

Home phone _____ Business phone _____

Email _____

Your Accounts

- You must be the owner of the account or have power of attorney to get access to an account.
- If there are more than 5 accounts, please provide information for the additional accounts on a separate form.

Account Number	Account Holder(s)	Paperless Statements (Y/N)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Your Scotiabank card number is your login ID. If you do not have a Scotiabank card, one will be issued to you by mail.

Questions?

Please contact us at 1-800-387-9273 or email at spiessmcgladeteam@scotiawealth.com for help with this form. Completed forms can be faxed to us at 416-863-7479.