(Personal Information Bank: PPU 038)

### APPLICATION FOR: Canada Disability Savings Grant and/or Canada Disability Savings Bond

Instructions:

- 1. This form is to be completed by the holder and the beneficiary (when of age of majority) of the Registered Disability Savings Plan (RDSP) to apply for the Canada Disability Savings Grant and/or Canada Disability Savings Bond. If the beneficiary is not of age of majority at the time of the original application, they should complete a new form when they turn 18 years of age, provided that they have legal capacity to sign for themselves.
- $2. \ \ Read \ this \ document \ carefully. \ If you have \ any \ questions, \ do \ not \ he sitate \ to \ ask \ the \ RDSP \ is suer.$
- 3. This form is valid only if completed, signed (or consent is provided to the issuer in an accepted manner), dated and given to the issuer. Do NOT send

	and Social Development Canada (ESDC). Kee			od dila givon to the locaer. D	o no r cond	
RDSP Issuer			RDSP	Contract No.		
Mackenzie Investments	3					
1	Information about the Benef	iciary				
Beneficiary	Complete the following information about the beneficiary of the RDSP.					
Beneficiary	The name must be entered exactly as it appears on Social Insurance Number (SIN) documentation.					
The <b>beneficiary</b> is the person who will receive the funds in the RDSP.	Beneficiary's Last Name	Beneficiary's F	irst Name	Beneficiary's Middle	Name	
	Definition y & East Name	Beneficiary 61	not runio	Beneficially 5 Wilder	rtano	
	Date of Birth (YYYY-MM-DD)	Social Insurance	ce Number (999 999	999)		
	Sate of Billar (TTT Milli BB)		50 (14am)50 (555 555)			
0						
2	Information about the Holde		fft f th h			
Holder	<ul> <li>Complete the following information only if</li> <li>The name must be entered exactly as it</li> </ul>			-		
You are the <b>holder</b> if you opened the RDSP.	If there is more than one holder, please					
you opened the NDSF.	Holder's Last Name	Holder's First N		Holder's Middle Nar		
or	1 lolder 5 Last Name	Tiolder's First I	varrie	Tibluer's Middle IVar	ile	
In the case of a child care agency, the agency	Name of Agency		Name of Agency	L		
is the holder.	Training of Figure 9			. topi oo o maaa o		
	Social Insurance Number/ Business Number	(if an Agency)		Total Number of Holders		
Note: the Social Insurar	nce Number contains nine digits (999 999 999)	and the Business	Number contains fif	teen alphanumeric character:	S	
(999 999 999 TX 9999)	, , , , , , , , , , , , , , , , , , ,			·		
3	Declaration and Consent of	the Holder				
The holder, <b>if not the</b>	Complete this section only if you completed Section 2, and are not the beneficiary.					
beneficiary, must read	I authorize the issuer to apply for the grant and/or the bond on behalf of the designated beneficiary.					
this section and sign (or provide consent in an	I confirm that the designated beneficiary meets all eligibility criteria identified in Section 5.1 and I agree to inform the issuer if, at any time, there is a change in the beneficiary's circumstances.					
accepted manner) to receive grants and	any time, there is a change in the beneficiary's circumstances.  I consent to the use and sharing of the beneficiary's personal information as long as they are less than the age of majority or					
bonds in the RDSP.	lack legal capacity.					
If the holder is also a primary caregiver,	I understand that the <i>Privacy Act</i> gives me the right to access or request correction to my personal information kept in the government file and as the authorized representative to do so for that of the beneficiary (if applicable, and provided that they are less than the age of majority or lack legal capacity).					
complete Annex B.	I confirm that I have read and understood this document, including my privacy rights found in Section 7, and I have received a					
	copy of this document. I consent to the use and sharing of my personal information. I certify that the information provided on this form is accurate to the best of my knowledge.					
	Date (YYYY-MM-DD)	Holder's Signa	ture			
4	Declaration and Concept of	the Benefic	niory.			
The beneficiary must read this section and sign (or provide consent in an accepted manner) to receive grants and bonds in the RDSP if the beneficiary is of the age of majority and has legal capacity to sign for themselves.	Declaration and Consent of the Beneficiary  If you indicated that you are the beneficiary in Section 1, complete this section if you have reached the age of majority,					
	and if you have legal capacity to sign for yourself.					
	Upon completion of this section, this form will be added to the issuer's records once the beneficiary turns 18 years of age, if the beneficiary has not previously provided consent.					
	I authorize the issuer to apply for the grant and/or the bond on my behalf.					
	I confirm that I meet all eligibility criteria identified in Section 5.1 and agree to inform the RDSP issuer if, at any time, there is a change in my circumstances.					
	I consent to the use and sharing of my personal information.					
	I understand that the <i>Privacy Act</i> gives me the right to access or request correction to my personal information kept in the government file.					
	I confirm that I have read and understood this document, including my privacy rights found in Section 7, and I have received a copy of this document. I consent to the use and sharing of my personal information. I certify that the information provided on this form is accurate to the best of my knowledge.					
	Date (YYYY-MM-DD)	Beneficiary's S	ignature			

Canada

#### 5

# Conditions for Payment of the Grant and/or Bond

This section explains some important conditions under which the grants and the bonds may be paid into an RDSP.

For more information, please refer to the Canada Disability Savings Act and the Income Tax Act.

1. The beneficiary must be eligible to receive the Disability Tax Credit (DTC) and be resident in Canada in the year in which the contribution to the RDSP is made (or, if applicable, the year to which the contribution is allocated) and in the year (or years) to which a bond is payable, as well as immediately before the bond is paid.

- In order for the grant or bond to be paid, an application must be made on or before December 31 of the year the beneficiary turns age 49. In addition, for the grant, contributions must also be made on or before this date.
- 3. The total of all contributions and 'rollover' amounts deposited to the RDSP of a beneficiary must not exceed \$200,000.
- 4. Not more than \$70,000 in grants and \$20,000 in bonds may be paid into the RDSP of a beneficiary during the beneficiary's lifetime.
- The amount of grant and bond entitlement for a given year depends on the beneficiary's family income of the second preceding tax year (for example, 2021 amounts are based on 2019 family income).
- 6. A beneficiary can be paid unused grant and bond entitlements from the past 10 years if the beneficiary met all eligibility criteria during those previous years. An application and a contribution (if applicable) must be made on or before December 31 of the year the beneficiary turns age 49. The matching rate for grants will be the same rate that would have applied had the contribution been made in the year in which the grant entitlement was earned. The amount of unused grant and bond entitlements depends on the family income established for the particular year that the unused entitlement was earned.
- 7. Grants and bonds can be paid on unused entitlements up to an annual maximum of \$10,500 for grant and \$11,000 for bond

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# Payment of the Grant and/or Bond

This section clarifies some of the administrative processes around the payment of the grant and bond.

The application for the grant and the bond, as applicable, will be submitted to ESDC's electronic system by the issuer at the time of each contribution, and/ or every year for the bond. A new client application form is not required for each contribution nor every year for the bond.

Unused entitlement to grant and bond for the last ten years will be calculated automatically. The Government of Canada's matching rate will be the same as the one that would have applied if the contribution had been made in the year in which the grant entitlement was earned. The matching rate is paid in descending order, using up any grant entitlements (beginning with the oldest year or entitlement) at the highest available matching rate first, followed by those at lower rates to which the beneficiary is entitled.

Up to and including the year that the beneficiary turns 18 years of age, the family income of the primary caregiver is used to determine the annual grant and bond entitlement (unless the beneficiary is under the care of a public department, agency, or institution legally authorized to act on behalf of the beneficiary and where the organization receives at least one payment in respect of the beneficiary under the *Children's Special Allowances Act*). Taxpayer information for the primary caregiver must be submitted on an annual basis to the Canada Revenue Agency (CRA) in order for the full eligible amount of grant and bond to be paid, as applicable, otherwise, bond payments will not be issued, and the maximum matching rate for grant will be limited to 100% of contributions up to \$1,000 each year.

Consent to use, share, and disclose the personal information of the primary caregiver(s) is required in order to determine the amount of grant and bond for each year that the entitlement was generated. **Annex B – Primary Caregiver** (ESDC-EMP5610) provides additional details and will need to be completed to ensure that the information for the years up to when the beneficiary turns 18 is available to determine the amount of grant and bond.

Starting in the year that the beneficiary turns 19 years of age and each year after this, the beneficiary's taxpayer information held by the CRA is used to verify family income, as well as validate eligibility criteria. This is true regardless of whether the beneficiary resides with or continues to receive support from their parents or guardians. Without updated taxpayer information, the maximum matching rate for the grant will be limited to 100% of contributions up to \$1,000 each year.

Should the plan holder ever wish to opt-out of receiving or discontinue payments of the grant and/or the bond into the beneficiary's RDSP, the 'Revocation of Request for Canada Disability Savings Grant and/or Canada Disability Savings Bond' form available at the issuer's place of business must be completed, signed (or consented to in an accepted manner), and given to the issuer.

#### 7

### **Your Privacy Rights**

This section explains why your information is collected and how it is used, shared and protected. It also explains how you can access your personal information.

The personal information you provide on this form is collected under the authority of the *Department of Employment and Social Development Act* (DESDA), the *Canada Disability Savings Act* (CDSA) and the *Income Tax Act* (ITA) for the purposes of determining eligibility, calculating amounts payable and administering the Canada Disability Savings Grant (grant) and/ or the Canada Disability Savings Bond (bond). Information may be used by and shared between Employment and Social Development Canada (ESDC), the Canada Revenue Agency (CRA), and the issuer for the administration of the CDSA and the ITA.

The Social Insurance Number (SIN) is collected under the authority of the CDSA and the ITA in accordance with the Treasury Board Secretariat Directive on Social Insurance Number. The SIN will be used as a file identifier and to ensure an individual's exact identification so that the beneficiary's eligibility for the Disability Tax Credit (DTC), residency and family income can be verified for the purposes of determining whether a grant or bond may be paid. While eligibility for the DTC may be verified, information contained within the Disability Tax Credit Certificate (i.e., the nature of the beneficiary's disability) will not be collected, used nor disclosed.

Where the beneficiary is not of the age of the majority, and/or does not have legal capacity, the holder authorizes the collection, use, and sharing of the beneficiary's personal information for this purpose.

Though you are not obligated to provide any personal information, refusal to do so will mean that ESDC will be unable to process your application.

The information you provide may be used and/or disclosed by ESDC for policy analysis, research and/or evaluation purposes. Personal information may also be disclosed to Statistics Canada for research and statistical purposes. However, these additional uses and/or disclosures of your personal information will never result in an administrative decision made about you (such as a decision on your entitlement to a grant and/or bond).

Once under the control of ESDC, your personal information is administered in accordance with the DESDA, the ITA, the CDSA, the *Privacy Act*, and all other applicable laws. You have the right to access or request correction to your personal information, which is described in Personal Information Bank "ESDC PPU 038". Instructions for obtaining this information are outlined in the government publication entitled *Info Source*, which is available at Canada.ca/infosource-ESDC. *Info Source* may also be accessed online at any Service Canada Centre.

You have the right to file a complaint with the <u>Privacy Commissioner of Canada</u> if you have concerns about the handling of your personal information. Additional information is available at www.priv.gc.ca/en

Ce formulaire est disponible en français This form is available in alternate formats

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RDSP Contract No.	

# 8

Definitions

These definitions are provided for your information only and do not constitute the legal definitions. In the event of a discrepancy, the legal definitions found in the Canada Disability Savings Act, and the

Income Tax Act prevail

Beneficiary: The individual who will receive payments from the RDSP.

**Disability Tax Credit (DTC):** A non-refundable tax credit available to individuals who, in a given taxation year, have one or more severe and prolonged impairments in physical or mental functions. A medical practitioner, using the appropriate form, must certify the effects of the impairment and the Canada Revenue Agency must approve the application. See the *Income Tax Act*, section 118.3 for further details.

**Government file:** The government file refers to any information collected under the authority of the DESDA, the CDSA, and the ITA for the purposes of determining eligibility for a Canada Disability Savings Grant (grant) or Canada Disability Savings Bond (bond), to calculate amounts payable and to administer the CDSA and the ITA. Such information may be held by ESDC and CRA.

**Holder:** Is an individual, agency, department or institution that opens an RDSP, names a beneficiary and authorizes or makes deposits (contributions) on behalf of the designated beneficiary into the RDSP. The plan holder may be the beneficiary, provided the beneficiary is of the age of majority and has legal capacity to sign (or provide consent in an accepted manner to the issuer) for themselves.

**Issuer:** A corporation authorized to offer the RDSP to the public. The issuer opens an RDSP for the holder on behalf of a designated beneficiary and handles related administrative matters.

**Primary caregiver:** For the purpose of the grant and the bond, the primary caregiver is/ are the person(s) eligible for the Canada Child Benefit (CCB) and whose name appears on CCB payments. Alternately, it may be the department, agency or institution that receives the allowance payable under the Children's Special Allowances Act. In cases of joint custody or a change in custody, there may be more than one primary caregiver for any given year(s) or part thereof. Similarly, there may be circumstances where the beneficiary was in the care of a department, agency, or institution for any given year(s) or part thereof.

Where to get more information about the Canada Disability Savings Grant and Canada Disability Savings Bond:

Phone: 1 800 O Canada (1 800 622-6232); 1-800-926-9105 (TTY) E-mail: <a href="mailto:rdsp-reei@hrsdc-rhdcc.gc.ca">rdsp-reei@hrsdc-rhdcc.gc.ca</a> Internet: <a href="mailto:www.canada.ca/rdsp">www.canada.ca/rdsp</a>

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