Scotiabank®

| | |
|---|---|
| **To:** Ben Smit<br>Rheann Smit<br>324 Quilchena Drive<br>Kelowna, BC<br>V1W 4Y9<br>**C/O:** Steven Nicholson<br>Origination Mortgage Corp | **From:** Scotiabank<br>2850 Sunridge Blvd. NE<br>Calgary, AB, T1Y 6G2<br>Phone: (877) 216-3282<br>Fax: (866) 216-8500 |

**Application ID:** 1967559

**Date Issued:** May 27, 2014

**Property Address:** 405 collett Road, Kelowna, BC, V1W 1K6

We are pleased to confirm that your application has been approved under the following terms and conditions.

| | | | |
|---|---|---|---|
| **Basic Loan Amount** | $780,000.00 | **Advance Date** | Jul 01, 2014 |
| **Insurance Premium** | $0.00 | **Term** | ** |
| **Total Loan Amount** | $780,000.00 | **Amortization** | ** |
| **Interest Rate** | ** | **Monthly Payment** | ** |
| ** See Interest Rate Section for more information | | (Principal + Interest Only) | |
| **Interest Rate Set Date** | Already Set | **Taxes to be paid** | by Borrower |
| **Guarantor(s)** | | | |

**Payment Frequency Options (please indicate your choice):**

Payment Frequency Options listed below are for new mortgage(s) only. If none selected, the mortgage payment will be set up as monthly. Payment amount **does not** include tax portion if taxes are to be paid through Scotiabank.

**New Mortgage 5 Year Closed FLEX VRM**

- ☐ $1,380.57 Monthly, First payment date: August 1, 2014
- ☑ $690.29 Bi-Weekly, First payment date: July 15, 2014
- ☐ $690.29 Semi-Monthly, First payment date: July 15, 2014
- ☐ $345.14 Weekly, First payment date: July 8, 2014

## PREPAYMENT POLICIES

### Prepayment

Our standard prepayment privileges apply. Full details on prepayment privileges, Match-a-Payment® and Miss-a-Payment® Options can be obtained from your servicing branch.

## INTEREST RATE

### Flex Value Mortgage

You have chosen a Scotia Flex Value® Mortgage, which is a Variable Rate Mortgage with a variable payment amount and no Cap Rate. Each time the Scotiabank Prime Rate changes, your variable interest rate and payment will be reset. - The interest rate payable by you on the loan amount is a variable rate, expressed as a rate per annum, equal to our Variable Rate Mortgage (VRM) Base Rate adjusted by our VRM Rate Variance. This VRM Rate Variance is guaranteed until September 2, 2014 - Terms commence on the Term Start Date. - The interest rate and payment amount are based on the VRM Base Rate in effect on the date of this commitment and are not guaranteed at funding. - Your actual interest rate and the corresponding payment amount will be based upon the VRM Base Rate in effect on the date your mortgage funds are advanced. Thereafter, the interest rate and payment amount will vary automatically immediately following any change to the VRM Base Rate. Please refer to your Personal Credit Agreement Companion Booklet for additional information. At any time, you can switch to a fixed term product — with a term greater than the remaining term on your Scotia Flex Value® Mortgage, with no prepayment charges.

Mortgage Component 1: Term: 5 year closed, VRM Rate Variance: -0.50%

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Scotiabank®

| Application ID: 1967559 | Property: 405 collett Road, Kelowna, BC, V1W 1K6 | Issued: May 27, 2014 |
|---|---|---|

**STEP-Uninsured**

Your Scotia Total Equity Plan® (STEP®) product breakdown is outlined below:
Global limit approved $780,000.00.
Collateral mortgage is to be registered for $0.00.
Total amount to be disbursed on closing $780,000.00.

Mortgage Component(s)
Principal amount $350,000.00, Term: 5 year closed, Rate: 2.50%, Am: 30 years, 0 months, P&I Pymt $1,380.57.
**The applicable interest rate guarantee is outlined in the Rate Adjustment section of this commitment.

Scotialine® Personal Line of Credit:
The interest rate shown is the Scotiabank Prime Rate at time of application, which is subject to fluctuation, plus an adjustment factor of 0.50%. The current bank prime is 3.00%.
Limit of $430,000.00, interest only payments, Initial draw down amount $430,000.00.

## CONDITIONS OF APPROVAL

**Offer and Listing**

You are to provide a copy of the complete signed and accepted purchase agreement and, if applicable, the Multiple Listing Service (MLS) agreement.

**Owner Occupied Property**

You must occupy the subject property as your principal residence.

**Downpayment - Own Resources**

You are to provide us with verification, satisfactory to us, that $195,000.00 for the down payment is available from your own resources. You must provide 30 days of history. If the funds are held in one or more deposit accounts, you must provide the most recent account history for each account. We may ask for additional account history.

**Income**

Verification of employment and income is required in the form of a signed letter on your employers letterhead and a paystub or notification of pay deposit, both of which must be dated within 60 days of the application date for:
Rheann Smit in the amount of $21,543.00

**Income - Self-Employed**

The following borrowers will verify their income by providing us with Notices of Assessment and T1 Generals or the Assessments from Canada Revenue Agency's My Account for the last two tax years (indicating that you are up-to-date on your tax payments). We also require evidence of at least two years self-employment by one of the following: • Business license ( Sole Proprietorship or Partnership only ) • Canada Revenue Agency's Notice of Return Adjustment/Summary (for a GST return)( Sole Proprietorship or Partnership only ) • T1 Generals with Statement of Business Activities attached for a minimum of 2 years( Sole Proprietorship or Partnership only ) • Financial statements for the last 2 years, prepared and signed by an accountant • Account documentation for an active Scotiabank business or commercial bank account. • Articles of Incorporation. Required for : Ben Smit in the amount of $441,773.00

**Additional Documentation Required**

For Ben Smit, we require the following additional documentation: Please provide a copy of Driver's License or other government issued photo identification. If the photo identification does not confirm home address, please also provide a copy of Utility / Cell Phone Bill dated within 3 months of application date.

**Branch Signing**

You must visit the designated branch to sign the required Bank documents before the scheduled closing date.

**Property - Taxes**

You are responsible to pay any municipal and other property taxes directly to the Municipality when they become due, and provide confirmation of payment to us when requested.

## SOLICITOR / NOTARY CONDITIONS

**Title Insurance Required**

Title insurance is mandatory for all mortgages on properties located in British Columbia. We will instruct your Solicitor/Notary to submit to us a lender's Title Insurance policy. You are responsible to pay your Solicitor/Notary for this service.

**Independent Legal Advice**

A Certificate of Independent Legal Advice for Rheann Smit is required.

INITIAL

**Solicitor**

This transaction will be completed by a solicitor/notary. We will instruct the solicitor/notary upon receipt of acceptance of this conditional approval and the requested information. For refinance transactions, the solicitor/notary will be responsible to pay out existing non-Scotiabank debts from the mortgage proceeds.

**Second Mortgage**

Secondary financing is not permitted.

## GENERAL CONDITIONS

**Condition Fulfillment**

You will pay all fees associated with arranging this mortgage, which includes any legal, survey, appraisal, and insurance mortgage costs.
All costs incurred to arrange this mortgage are your responsibility.

**Appraisal - Broker to Order from Appraisal management company**

Your broker is to request an appraisal report using the Bank's approved appraisal service provider to confirm property requirements are met.

**Cancellation Clause**

We may cancel this approval if we find your financial status has changed materially from what you disclosed in this application — or if there has been any misrepresentation of the facts in this application or other documentation.

**Due on sale**

The mortgage cannot be assumed by subsequent purchaser(s).

**Signed Commitment**

Return to us this signed Commitment Letter, void cheque (banking details) and Solicitor/Notary information.

All borrowers and guarantors, as applicable, are required to sign the acceptance page of this commitment and return it to us by June 11, 2014.

Yours truly,

*Jeffery Hamilton*

Underwriter, Scotiabank

INITIAL

**Scotiabank**®

| **Application ID:** 1967559 | **Property:** 405 collett Road, Kelowna, BC, V1W 1K6 | **Issued:** May 27, 2014 |
|---|---|---|

**CUSTOMER AUTHORIZATION / ACKNOWLEDGEMENT**

In this Commitment Letter, "we", "our" and "us" mean any Scotiabank Group Member or the collective Scotiabank Group and include any program or joint venture any of these parties participates in; "you" and "your" mean the applicant and co-applicant (if applicable). "Service" means any personal banking, insurance, brokerage or financial product or service offered by us. You agree that all information that you give us will, at any time, be true and complete.

We may collect your personal information, use it, and disclose it to any person or organization in order to: confirm your identity; understand your needs; determine your eligibility for our Services; satisfy applicable legal and regulatory requirements; manage and assess our risks; and prevent or detect fraud or criminal activity. We may keep and use information about you for as long as it is needed for the purposes described in this Commitment Letter.

In addition, we may offer you Services that we think may be of interest to you, and give information about you to other members of the Scotiabank Group so that these companies may tell you directly about their Services. Your consent to this is not a condition of doing business with us and you may withdraw it at any time.

When you apply for, accept, or guarantee a loan or credit facility or otherwise become indebted to us, we may use, give to, obtain, verify, share and exchange financial, credit and other information about you with others including your employer, credit bureaus, mortgage insurers, creditor insurers, reinsurers, registries, other companies in the Scotiabank Group, Investigative Bodies such as the Bank Crime Prevention and Investigation Office and other persons with whom you may have financial dealings, as well as any other person as may be permitted or required by law. We may do this throughout the relationship we have with you. You authorize any person whom we contact in this regard to provide such information to us.

We may ask you for your SIN to verify and report credit information to credit bureaus and credit reporting agencies as well as to confirm your identity. You may refuse to consent to its use or disclosure for purposes other than as required by law.

We do not provide directly all the services related to your relationship with us. We may use third party service providers to process or handle personal information on our behalf and to assist us with various services. Some of our service providers are located outside of Canada. As a result, your personal information may be accessible to regulatory authorities in accordance with the law of these jurisdictions. When personal information is provided to our service providers, we will require them to protect the information in a manner that is consistent with Scotiabank Group privacy policies and practices.

**Third Party Determination** - By signing this Commitment Letter you confirm that the product(s) and/or service(s) offered to you herein will not be used for or on behalf of any individual or entity other than you and the other parties named in the Commitment Letter for whose benefit such products and services are intended unless information about such individuals or entities was previously disclosed to the Bank on a Scotiabank Group Third Party Determination form.

**Pre-Authorized Payment Information (Please provide us with a cheque marked VOID drawn on the account where you would like the payments taken from).**

| | |
|---|---|
| Bank Number: 001 | Financial Institution Name: BMO |
| Transit Number: 27380 | Account Number: 3045686 |
| Financial Institution Address: 16 · 3155 LAKESHORE RD. KELOWNA, BC 250 · 861 · 1651 | |

**Solicitor/Notary Contact Information**

| | |
|---|---|
| Name: LEE TURNER | Firm Name: DOAK SHERRIFF |
| Address: 200 - 587 LEON AVE, KELOWNA, BC. | |
| Phone: 250.979.2531 | Fax: 250.763.4780 |

Any disclosure statement in connection with the loan you are applying for may be given at the time that you enter into the Personal Credit Agreement, if you give us your e-mail address, either on the application or elsewhere, you agree that any disclosure statement, which you receive, may be in an electronic format which you may retrieve and retain.

Please correspond in: ☑ English ☐ French

**Applicable in the Province of Quebec only:** It is the express wish of the parties that this Authorization and all documents relating to it be drawn up and executed in English. Les parties conviennent et exigent expressément que ce contrat et tous les documents qui s'y rapportent soient rédigés en anglais.

Each borrower is entitled to receive separate agreements and disclosure documents for the loan. By signing below, you consent to all agreements and disclosures being sent only to the address of the person whose signature appears first on this commitment letter, this includes the initial disclosure statement and credit agreement, as well as all subsequent statements, agreements, disclosure or other notices related to the loan. You acknowledge that you have been advised of your ability to receive separate disclosure and have declined. You agree that we may rely on this consent through all subsequent extensions, renewals and amendments related to the loan, until such time as you give us notice in writing that you wish to change your disclosure preference. You may change your disclosure preference at any time by contacting you Scotiabank branch. Alternatively, if you wish to receive separate disclosure, please indicate by selecting 'yes' below.

The terms and conditions detailed in this mortgage commitment are hereby accepted this 27 day of MAY, 2014.

Ben Smit

R E Smit
Rheann Smit

Receive Notices
☐ Yes

BRITISH COLUMBIA
The Best Place on Earth

**Registrar of Mortgage Brokers**
**1200² 13450 102nd Avenue**
**Surrey, BC V3T 5X3**

# BORROWER CONFLICT OF INTEREST DISCLOSURE STATEMENT
## FORM 10 - Section 17.3

This information statement has not been filed with the Registrar of Mortgage Brokers. There has been no determination made by the Registrar as to whether the disclosed information complies with the *Mortgage Brokers Act*.

***Please write or print clearly. If additional information is required, reference and attach a schedule to this form.***

Ben Smit, Rheann Smit
*Name of Borrower(s):*

Scotiabank / Banque Scotia
*Name of Lender:*

Origination Mortgage Corp. — (250) 212-2010
*Name of Mortgage Broker:* — *Telephone:*

Steve Nicholson — Jul 01, 2014
*Name of Submortgage Broker:* — *Date of transaction:*

405 collett Road Kelowna, British Columbia V1W 1K6
*Civic address of property to be mortgaged:*

Detached Lot A, Plan KAP66531
*Legal description of property to be mortgaged:*

**Other Parties to the Transaction Represented by the Mortgage Broker**

The Mortgage Broker represents the following parties to the transaction:

- [X] The borrower(s): Ben & Rheann Smit
- [X] The lender: Scotiabank
- [ ] Syndicate mortgage lenders: *Name* ______ *Name* ______ *Name* ______
  *(attach list if more space required)*
- [X] A person or entity which will acquire the mortgage from the investor/lender: Ben & Rheann Smit
  *Name*
- [ ] Other - please describe:

**NOTE:**
**If the Mortgage Broker has NOT indicated that it represents you, the Mortgage Broker must still exercise a duty of care to you and deal with you fairly. It is recommended that you obtain independent advice with respect to the transaction.**



INITIAL

**Mortgage Broker's Interest in the Transaction**

[X] The Mortgage Broker and/or its associates or related parties **will not** acquire a direct or indirect interest in the transaction described above.

[ ] The Mortgage Broker and/or its associates or related parties **will** acquire a direct or indirect interest in the transaction described above. In particular, ____________________,
(State the Name of Party)
who is ____________________ will:
(State Relationship with Mortgage Broker)

- [ ] be the lender in the transaction;
- [ ] be a syndicate mortgage lender with the lender/investors;
- [ ] acquire the mortgage from the lender or investor; or
- [ ] ____________________
(Identify nature of interest)

**Are there Other Mortgage Brokers acting in this Transaction?**

(X) No
( ) Yes ____________________
(State Name, Relationship to Mortgage Broker and/or Borrowers and role in transaction)
____________________

**Compensation to the Mortgage Broker**

The Mortgage Broker will be compensated for this mortgage transaction in the following ways:

- [X] Commission/income or fee paid by the lender
- [ ] Commission/income or fee paid by another mortgage broker
- [ ] ____________________
(Other - please specify)

The Mortgage Broker may (or will) also receive additional compensation (either monetary or non-monetary) from the lender which includes:

- [X] Additional commission/income based on its or another mortgage broker's volume of business or funding efficiency with the lender
- [ ] Additional commission/income because the Borrower is paying a higher interest rate than would otherwise be available to the Borrower from the lender in the transaction
- [X] Points, Rewards and other incentives
(Other- please describe)

**Referrals to the Mortgage Broker**

The Mortgage Broker, its associates or related parties have paid or will pay a fee in the amount of $ 0 to NA (Name) for receiving a referral or recommendation relating to the transaction.



INITIAL

**Please state any other facts which may result in a conflict of interest with the borrower:**

## CERTIFICATION

I certify that I am the mortgage broker or an authorized representative of the mortgage broker and based on my knowledge, belief and information provided by third parties, this Disclosure Statement contains no untrue statement and does not omit to state a fact that is required to be stated or that Is necessary to prevent a statement that is made from being false or misleading in circumstances in which it was made.

| | |
|---|---|
| Origination Mortgage Corp. | 2061 Abbott Street Kelowna, British Columbia, V1Y1C5 |
| *Full name of Mortgage Broker* | *Address (Including Postal Code)* |
| | 2014,05,08 |
| *Signature of Mortgage Broker or Authorized Representative* | *Date Signed (YYYY,MM,DD)* |

## ACKNOWLEDGEMENT OF RECEIPT

| | | |
|---|---|---|
| | | 2014,05,08 |
| *Signature* | *Name (Please Print)* | *Date Signed (YYYY,MM,DD)* |
| | | 2014,05,08 |
| *Signature* | *Name (Please Print)* | *Date Signed (YYYY,MM,DD)* |

ORIGINATION MORTGAGE CORP
278 Mathison Place
Kelowna, BC
V1Y 5R5
T: 250.212.2010
F: 778.478.9093
steve@origination.ca

# Protecting your mortgage?

DATE : May 8, 2014

Applicant: Ben Smit

Co-Applicant(s): Rheann Smit

A mortgage is the single largest debt most Canadians have, making your mortgage insurance an important responsibility. At Origination Mortgage we recognize that mortgage insurance from your bank or lender may not be your best solution. Our network of qualified Financial Planners can help you compare your choices.

**Please choose One of the following:**

☑ I/We would like to see more options, choices and compare this to mortgage insurance offered by the bank or lender. Please have Jeremy Harris of JS Harris Financial contact me at ____________________ to determine the best plan for me.

☑ I/We Choose to decline the options for mortgage insurance. I/We understand that by declining this options, I/We personally assume all responsibility for this decision and release Origination Mortgage Corp from any future liability.

Sincerely,

R E Smit

Signature of Applicant                Signature of Co-Applicant(s)

Witness to Signature(s):

_______________________

Signature of Witness

BEN SMIT
324 QUILCHENA DR
KELOWNA BC V1W 4Y9
(250) 764-3121

071

DATE 2 0 - -
Y Y Y Y M M D D

PAY TO THE ORDER OF $

VOID

/100 DOLLARS

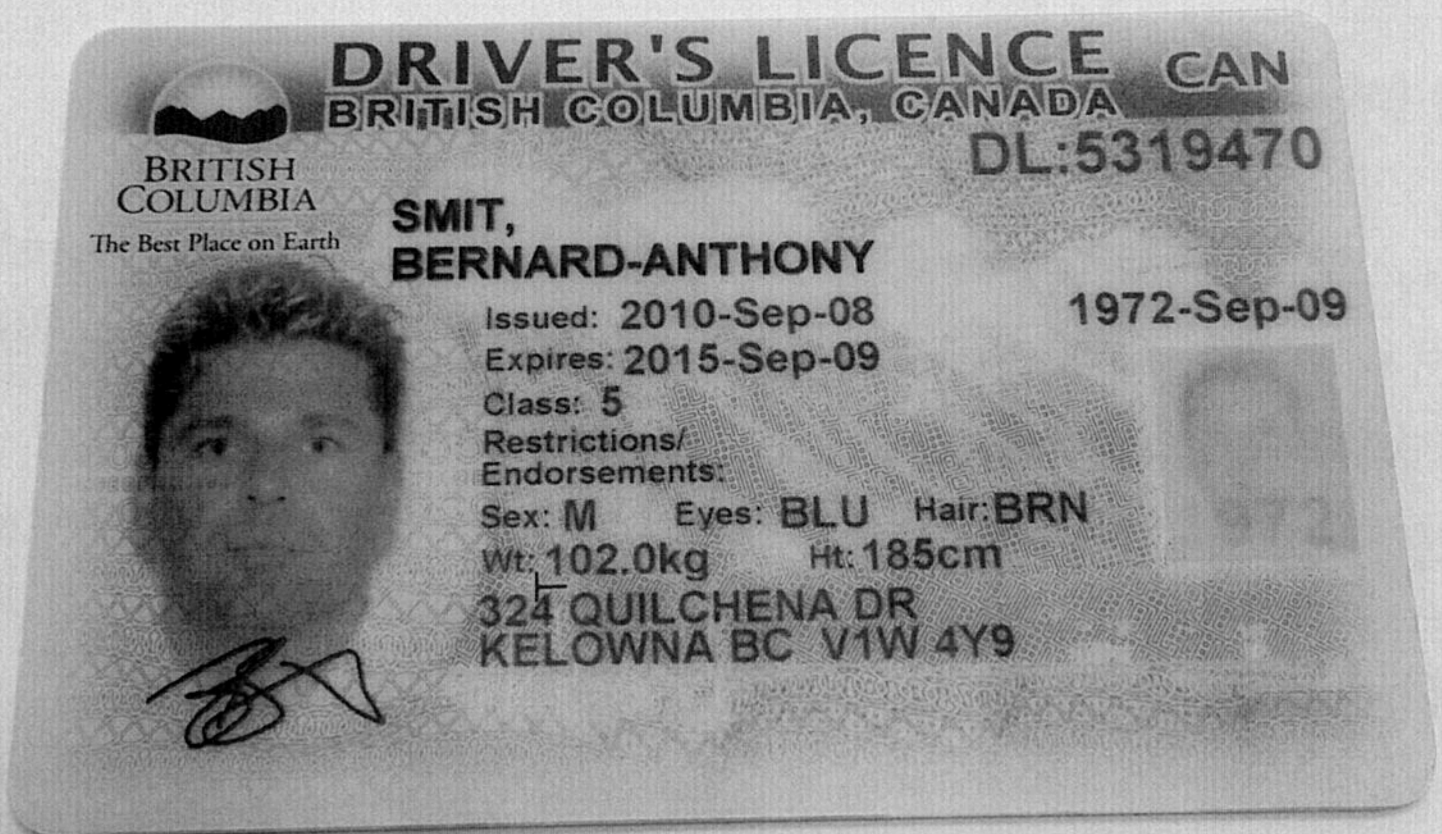
Security features included. Details on back.

BMO Bank of Montreal
16 - 3155 LAKESHORE ROAD TEL: (250) 861-1651
KELOWNA, BC V1W 3S9

MEMO

MP

⑈071⑈ ⑆27380⑉001⑆ 3045⑉686⑈



DRIVER'S LICENCE CAN

BRITISH COLUMBIA, CANADA

DL:5319470

BRITISH COLUMBIA

The Best Place on Earth

SMIT,
BERNARD-ANTHONY

1972-Sep-09

Issued: 2010-Sep-08

Expires: 2015-Sep-09

Class: 5

Restrictions/
Endorsements:

Sex: M Eyes: BLU Hair: BRN

Wt: 102.0kg Ht: 185cm

324 QUILCHENA DR
KELOWNA BC V1W 4Y9

Canada Revenue Agency | Agence du revenu du Canada

# T1 GENERAL 2012

## Income Tax and Benefit Return

## Identification

BC 7

First name and initial: MR. BEN

Last name: SMIT

Mailing address: Apt No – Street No Street name: 324 QUILCHENA DRIVE

PO Box | RR

City: KELOWNA

Prov./Terr.: BC Postal code: V1W 4Y9

### Information about your residence

Enter your province or territory of residence on **December 31, 2012**: British Columbia

Enter the province or territory where you **currently** reside if it is not the same as your mailing address above:

If you were self-employed in 2012, enter the province or territory of self-employment:

If you **became** or **ceased** to be a **resident of Canada** for income tax purposes **in 2012**, enter the date of:

**entry** Month Day ____ or **departure** Month Day ____

### Information about you

Enter your social insurance number (SIN): 725 131 270

Enter your date of birth: Year Month Day 1972-09-09

Your language of correspondence: / Votre langue de correspondance : English [X] Français [ ]

### Marital status

**Tick the box that applies to your marital status on December 31, 2012:**

1 [X] Married 2 [ ] Living common-law 3 [ ] Widowed
4 [ ] Divorced 5 [ ] Separated 6 [ ] Single

### Information about your spouse or common-law partner (if you ticked box 1 or 2 above)

Enter his or her SIN: 730 409 711

Enter his or her first name: RHEANN

Enter his or her net income for 2012 to claim certain credits: 19,496|25

Enter the amount of universal child care benefit (UCCB) from line 117 of his or her return: 1,800|00

Enter the amount of UCCB repayment from line 213 of his or her return:

Tick this box if he or she was self-employed in 2012: 1 [X]

### Person deceased in 2012

If this **return** is for a **deceased person**, enter the date of death: Year Month Day

**Do not use this area**

### Elections Canada (see the Elections Canada page in the tax guide for details or visit **www.elections.ca**)

A) Are you a Canadian citizen? . . . . . Yes [X] 1 No [ ] 2

Answer the following question **only if you are a Canadian citizen.**

B) As a Canadian citizen, do you authorize the Canada Revenue Agency to give your name, address, date of birth, and citizenship to Elections Canada to update the National Register of Electors? . . . . . Yes [ ] 1 No [X] 2

Your authorization is valid until you file your next return. Your information will only be used for purposes permitted under the *Canada Elections Act*, which include sharing the information with provincial/territorial election agencies, members of Parliament, and registered political parties, as well as candidates at election time.

### Goods and services tax/harmonized sales tax (GST/HST) credit application

(See the guide for details)

Are you applying for the GST/HST credit (including any related provincial credit)? . . . . . Yes [ ] 1 No [X] 2

| Do not use this area | 172 | | | | | 171 | | | | |
|---|---|---|---|---|---|---|---|---|---|---|

## Please answer the following question:

Did you own or hold foreign property at any time in 2012 with a total cost of more than CAN$100,000? see "Foreign income" section in the guide for more information .............. 266 Yes [ ] 1 No [X] 2

If **yes**, complete Form T1135 and attach it to your return.

If you had dealings with a non-resident trust or corporation in 2012, see "Foreign income" in the guide.

**As a resident of Canada, you have to report your income from all sources both inside and outside Canada.**

## Total income

| | | | | |
|---|---|---|---|---|
| Employment income (box 14 of all T4 slips) | | | 101 | 510,024 56 |
| Commissions included on line 101 (box 42 of all T4 slips) | 102 | 502,050 50 | | |
| Other employment income | | | 104 | 1,500 00 |
| Old age security pension (box 18 of the T4A(OAS) slip) | | | 113 | |
| CPP or QPP benefits (box 20 of the T4A(P) slip) | | | 114 | |
| Disability benefits included on line 114 (box 16 of the T4A(P) slip) | 152 | | | |
| Other pensions or superannuation | | | 115 | |
| Elected split-pension amount (**attach** Form T1032) | | | 116 | |
| Universal child care benefit (UCCB) | | | 117 | |
| UCCB amount designated to a dependant | 185 | | | |
| Employment insurance and other benefits (box 14 of the T4E slip) | | | 119 | |
| Taxable amount of dividends (eligible **and** other than eligible) from taxable Canadian corporations (**attach** Schedule 4) | | | 120 | 867 85 |
| Taxable amount of dividends other than eligible dividends, included on line 120, from taxable Canadian corporations | 180 | | | |
| Interest and other investment income (**attach** Schedule 4) | | | 121 | 214 31 |
| Net partnership income: limited or non-active partners only | | | 122 | |
| Registered disability savings plan income | | | 125 | |
| Rental income — Gross 160 | | Net | 126 | |
| Taxable capital gains (**attach** Schedule 3) | | | 127 | |
| Support payments received — Total 156 | | Taxable amount | 128 | |
| RRSP income (from all T4RSP slips) | | | 129 | |
| Other income — Specify: | | | 130 | |
| Self-employment income | | | | |
| Business income — Gross 162 | | Net | 135 | |
| Professional income — Gross 164 | | Net | 137 | |
| Commission income — Gross 166 | | Net | 139 | |
| Farming income — Gross 168 | | Net | 141 | |
| Fishing income — Gross 170 | | Net | 143 | |
| Workers' compensation benefits (box 10 of the T5007 slip) | 144 | | | |
| Social assistance payments | 145 | | | |
| Net federal supplements (box 21 of the T4A(OAS) slip) | 146 | | | |
| Add lines 144, 145, and 146 (see line 250 in the guide). | | | ▶ 147 | |
| Add lines 101, 104 to 143, and 147. | | This is your **total income**. | 150 | 512,606 72 |

**Attach your Schedule 1 (federal tax) and Form 428 (provincial or territorial tax) here. Also attach here any other schedules, information slips, forms, receipts, and documents that you need to include with your return.**

## Net income

| | | | | | |
|---|---|---|---|---|---|
| Enter your **total income** from line 150. | | | | 150 | 512,606 72 |
| Pension adjustment (box 52 of all T4 slips and box 034 of all T4A slips) | 206 | | | | |
| Registered pension plan deduction (box 20 of all T4 slips and box 032 of all T4A slips) | | 207 | | | |
| RRSP deduction (see Schedule 7, and **attach** receipts) | | 208 | 20,541 55 | | |
| Deduction for elected split-pension amount (**attach** Form T1032) | | 210 | | | |
| Annual union, professional, or like dues (box 44 of all T4 slips, and receipts) | | 212 | | | |
| Universal child care benefit repayment (box 12 of all RC62 slips) | | 213 | | | |
| Child care expenses (**attach** Form T778) | | 214 | | | |
| Disability supports deduction | | 215 | | | |
| Business investment loss | Gross 228 | Allowable deduction 217 | | | |
| Moving expenses | | 219 | | | |
| Support payments made | Total 230 | Allowable deduction 220 | | | |
| Carrying charges and interest expenses (**attach** Schedule 4) | | 221 | 532 00 | | |
| Deduction for CPP or QPP contributions on self-employment and other earnings (**attach** Schedule 8) | | 222 | | • | |
| Exploration and development expenses (**attach** Form T1229) | | 224 | | | |
| Other employment expenses | | 229 | 53,923 50 | | |
| Clergy residence deduction | | 231 | | | |
| Other deductions | Specify: | 232 | | | |
| Add lines 207 to 224, 229, 231, and 232. | | 233 | 74,997 05 | ► | 74,997 05 |
| Line 150 minus line 233 (if negative, enter "0") | | This is your **net income before adjustments**. | | 234 | 437,609 67 |
| Social benefits repayment (if you reported income on line 113, 119, or 146, see line 235 in the guide). Use the federal worksheet to calculate your repayment. | | | | 235 | • |
| Line 234 minus line 235 (if negative, enter "0") If you have a spouse or common-law partner, see line 236 in the guide. | | This is your **net income**. | | 236 | 437,609 67 |

## Taxable income

| | | | | |
|---|---|---|---|---|
| Canadian Forces personnel and police deduction (box 43 of all T4 slips) | 244 | | | |
| Employee home relocation loan deduction (box 37 of all T4 slips) | 248 | | | |
| Security options deductions | 249 | | | |
| Other payments deduction (if you reported income on line 147, see line 250 in the guide) | 250 | | | |
| Limited partnership losses of other years | 251 | | | |
| Non-capital losses of other years | 252 | | | |
| Net capital losses of other years | 253 | | | |
| Capital gains deduction | 254 | | | |
| Northern residents deductions (**attach** Form T2222) | 255 | | | |
| Additional deductions Specify: | 256 | | | |
| Add lines 244 to 256. | 257 | | ► | |
| Line 236 minus line 257 (if negative, enter "0") | This is your **taxable income**. | | 260 | 437,609 67 |

**Use your taxable income to calculate your federal tax on Schedule 1 and your provincial or territorial tax on Form 428.**

## Refund or balance owing

| | | |
|---|---|---|
| Net federal tax: enter the amount from line 58 of Schedule 1 (**attach** Schedule 1, even if the result is "0") | 420 | 113,347 01 |
| CPP contributions payable on self-employment and other earnings (**attach** Schedule 8) | 421 | |
| Employment insurance premiums payable on self-employment and other eligible earnings (**attach** Schedule 13) | 430 | |
| Social benefits repayment (amount from line 235) | 422 | |
| **Provincial or territorial tax** (**attach** Form 428, even if the result is "0") | 428 | 56,410 36 |
| Add lines 420, 421, 430, 422, and 428. This is your **total payable.** | 435 | 169,757 37 • |

| | | | |
|---|---|---|---|
| Total income tax deducted | 437 | 200,936 04 • | |
| Refundable Quebec abatement | 440 | • | |
| CPP overpayment (enter your excess amount) | 448 | • | |
| Employment insurance overpayment (enter your excess amount) | 450 | • | |
| Refundable medical expense supplement (use the federal worksheet) | 452 | • | |
| Working income tax benefit (WITB) (**attach** Schedule 6) | 453 | • | |
| Refund of investment tax credit (**attach** Form T2038(IND)) | 454 | • | |
| Part XII.2 trust tax credit (box 38 of all T3 slips) | 456 | • | |
| Employee and partner GST/HST rebate (**attach** Form GST370) | 457 | • | |
| Tax **paid** by instalments | 476 | • | |
| **Provincial or territorial credits** (**attach** Form 479 if it applies) | 479 | • | |
| Add lines 437 to 479. These are your **total credits.** | 482 | 200,936 04 | ▶ 200,936 04 |
| Line 435 minus line 482. This is your **refund** or **balance owing.** | | | -31,178 67 |

If the result is negative, you have a **refund**. If the result is positive, you have a **balance owing**.
Enter the amount below on whichever line applies.

Generally, we do not charge or refund a difference of $2 or less.

**Refund** 484 31,178 67 •

**Balance owing** 485 •

**Amount enclosed** 486 •

Attach to page 1 a **cheque** or **money order** payable to the Receiver General, or make your payment online (go to **www.cra.gc.ca/mypayment**). Your payment is due no later than April 30, 2013.

**Direct deposit – Start or change (see line 484 in the guide)**

**You do not have to complete this area every year.** Do not complete it this year if your direct deposit information has not changed.
**Income tax refund, GST/HST credit, WITB advance payments, and any other deemed overpayment of tax** – To start direct deposit or to change account information, complete lines 460, 461, and 462 below.

**Notes:** To deposit your **CCTB** payments (including certain related provincial or territorial payments) into the **same** account, also tick box 463. To deposit your **UCCB** payments into the **same** account, also tick box 491.

| Branch number | Institution number | Account number | CCTB | UCCB |
|---|---|---|---|---|
| 460 | 461 | 462 | 463 | 491 |
| (5 digits) | (3 digits) | (maximum 12 digits) | | |

Prepared solely for income tax purposes without audit or review from information provided by the taxpayer.

I certify that the information given on this return and in any documents attached is correct, complete, and fully discloses all my income.

**Sign here**

It is a serious offence to make a false return.

Telephone (250) 764-3121 Date 2013-03-21

490 **If a fee was charged for preparing this return, complete the following:**

Name of preparer: BDO Canada LLP

Telephone: (250) 763-6700

EFILE number (if applicable): 489 A2279

**Do not use this area** 487 488

Canada Revenue Agency | Agence du revenu du Canada

# Income Tax and Benefit Return

# T1 GENERAL 2013

## Identification

BC 7

First name and initial: MR BEN

Last name: SMIT

Mailing address: Apt No – Street No Street name: 324 QUILCHENA DRIVE

PO Box | RR

City: KELOWNA

Prov./Terr.: BC   Postal code: V1W 4Y9

### Information about you

Enter your social insurance number (SIN): 725 131 270

Enter your date of birth (Year Month Day): 1972-09-09

Your language of correspondence: / Votre langue de correspondance : English [X] Français [ ]

### Is this return for a deceased person?

If this **return** is for a **deceased person**, enter the date of death: Year Month Day

### Marital status

**Tick the box that applies to your marital status on December 31, 2013:**

1 [X] Married   2 [ ] Living common-law   3 [ ] Widowed
4 [ ] Divorced   5 [ ] Separated   6 [ ] Single

### Information about your spouse or common-law partner (if you ticked box 1 or 2 above)

Enter his or her SIN: 730 409 711

Enter his or her first name: RHEANN

Enter his or her net income for 2013 to claim certain credits: 20,726|25

Enter the amount of universal child care benefit (UCCB) from line 117 of his or her return: 1,200|00

Enter the amount of UCCB repayment from line 213 of his or her return:

Tick this box if he or she was self-employed in 2013: 1 [X]

**Do not use this area**

### Information about your residence

Enter your province or territory of residence on **December 31, 2013**: British Columbia

Enter the province or territory where you **currently** reside if it is not the same as your mailing address above:

If you were self-employed in 2013, enter the province or territory of self-employment:

If you **became** or **ceased** to be a **resident of Canada** for income tax purposes **in 2013**, enter the date of:

**entry** Month Day ____ or **departure** Month Day ____

## Residency information for tax administration agreements

For more information, see Information Sheet T1-BC10(E), *Residency information for tax administration agreements*, included in this package.

Did you reside within **Nisga'a Lands** on December 31, 2013? . . . . . Yes [ ] 1 No [X] 2

If **yes**, are you a citizen of the **Nisga'a Nation**? . . . . . Yes [ ] 1 No [ ] 2

## Elections Canada (see the Elections Canada page in the tax guide for details or visit **www.elections.ca**)

A) Are you a Canadian citizen? . . . . . Yes [X] 1 No [ ] 2

Answer the following question **only if you are a Canadian citizen.**

B) As a Canadian citizen, do you authorize the Canada Revenue Agency to give your name, address, date of birth, and citizenship to Elections Canada to update the National Register of Electors? . . . . . Yes [ ] 1 No [X] 2

Your authorization is valid until you file your next return. Your information will only be used for purposes permitted under the *Canada Elections Act*, which include sharing the information with provincial/territorial election agencies, members of Parliament, and registered political parties, as well as candidates at election time.

## Goods and services tax/harmonized sales tax (GST/HST) credit application

See the guide for details.

Are you applying for the GST/HST credit (including any related provincial credit)? . . . . . Yes [ ] 1 No [X] 2

| Do not use this area | 172 | | | | | 171 | | | | |
|---|---|---|---|---|---|---|---|---|---|---|

**Please answer the following question:**

Did you own or hold foreign property at any time in 2013 with a total cost of more than CAN$100,000? see "Foreign income" section in the guide for more information . . . . . . . . . . . . . . **266** Yes [ ] 1 No [X] 2

If **yes**, complete Form T1135 and attach it to your return.

If you had dealings with a non-resident trust or corporation in 2013, see "Foreign income" in the guide.

**As a resident of Canada, you have to report your income from all sources both inside and outside Canada.**

## Total income

| | | | | |
|---|---|---|---|---|
| Employment income (box 14 of all T4 slips) | | | 101 | 438,523 21 |
| Commissions included on line 101 (box 42 of all T4 slips) | 102 | 427,439 53 | | |
| Wage loss replacement contributions (see line 101 in the guide) | 103 | | | |
| Other employment income | | | 104 | 1,437 50 |
| Old age security pension (box 18 of the T4A(OAS) slip) | | | 113 | |
| CPP or QPP benefits (box 20 of the T4A(P) slip) | | | 114 | |
| Disability benefits included on line 114 (box 16 of the T4A(P) slip) | 152 | | | |
| Other pensions and superannuation | | | 115 | |
| Elected split-pension amount (**attach** Form T1032) | | | 116 | |
| Universal child care benefit (UCCB) | | | 117 | |
| UCCB amount designated to a dependant | 185 | | | |
| Employment insurance and other benefits (box 14 of the T4E slip) | | | 119 | |
| Taxable amount of dividends (eligible **and** other than eligible) from taxable Canadian corporations (**attach** Schedule 4) | | | 120 | 725 61 |
| Taxable amount of dividends other than eligible dividends, included on line 120, from taxable Canadian corporations | 180 | | | |
| Interest and other investment income (**attach** Schedule 4) | | | 121 | 155 49 |
| Net partnership income: limited or non-active partners only | | | 122 | |
| Registered disability savings plan income | | | 125 | |
| Rental income | Gross 160 | | Net 126 | |
| Taxable capital gains (**attach** Schedule 3) | | | 127 | 933 59 |
| Support payments received | Total 156 | | Taxable amount 128 | |
| RRSP income (from all T4RSP slips) | | | 129 | |
| Other income Specify: | | | 130 | |
| Self-employment income | | | | |
| Business income | Gross 162 | | Net 135 | |
| Professional income | Gross 164 | | Net 137 | |
| Commission income | Gross 166 | | Net 139 | |
| Farming income | Gross 168 | | Net 141 | |
| Fishing income | Gross 170 | | Net 143 | |
| Workers' compensation benefits (box 10 of the T5007 slip) | 144 | | | |
| Social assistance payments | 145 | | | |
| Net federal supplements (box 21 of the T4A(OAS) slip) | 146 | | | |
| Add lines 144, 145, and 146 (see line 250 in the guide). | | | ▶ 147 | |
| Add lines 101, 104 to 143, and 147. | | This is your **total income.** | 150 | 441,775 40 |

**Attach your Schedule 1 (federal tax) and Form 428 (provincial or territorial tax) here. Also attach here any other schedules, information slips, forms, receipts, and documents that you need to include with your return.**

## Net income

| | | | | |
|---|---|---|---|---|
| Enter your **total income** from line 150. | | | 150 | 441,775.40 |
| Pension adjustment (box 52 of all T4 slips and box 034 of all T4A slips) | 206 | | | |
| Registered pension plan deduction (box 20 of all T4 slips and box 032 of all T4A slips) | 207 | | | |
| RRSP/pooled registered pension plan (PRPP) deduction (see Schedule 7, and **attach** receipts) | 208 | 29,800.00 | | |
| PRPP **employer** contributions (amount from your PRPP contribution receipts) | 205 | | | |
| Deduction for elected split-pension amount (**attach** Form T1032) | 210 | | | |
| Annual union, professional, or like **dues** (box 44 of all T4 slips, and receipts) | 212 | | | |
| Universal **child** care benefit repayment (box 12 of all RC62 slips) | 213 | | | |
| Child care expenses (**attach** Form T778) | 214 | | | |
| Disability supports deduction | 215 | | | |
| Business investment loss — Gross 228 — Allowable deduction | 217 | | | |
| Moving expenses | 219 | | | |
| Support payments made — Total 230 — Allowable deduction | 220 | | | |
| Carrying charges and interest expenses (**attach** Schedule 4) | 221 | 851.05 | | |
| Deduction for CPP or QPP contributions on self-employment and other earnings (**attach** Schedule 8 or Form RC381, whichever applies) | 222 | | • | |
| Exploration and development expenses (**attach** Form T1229) | 224 | | | |
| Other employment expenses | 229 | 44,347.53 | | |
| Clergy residence deduction | 231 | | | |
| Other deductions — Specify: | 232 | | | |
| Add lines 207, 208, 210 to 224, 229, 231, and 232. | 233 | 74,998.58 | ► | 74,998.58 |
| Line 150 minus line 233 (if negative, enter "0") — This is your **net income before adjustments.** | | | 234 | 366,776.82 |
| Social benefits repayment (if you reported income on line 113, 119, or 146, see line 235 in the guide). Use the federal worksheet to calculate your repayment. | | | 235 | • |
| Line 234 minus line 235 (if negative, enter "0") If you have a spouse or common-law partner, see line 236 in the guide. — This is your **net income.** | | | 236 | 366,776.82 |

## Taxable income

| | | | | |
|---|---|---|---|---|
| Canadian Forces personnel and police deduction (box 43 of all T4 slips) | 244 | | | |
| Employee home relocation loan deduction (box 37 of all T4 slips) | 248 | | | |
| Security options deductions | 249 | | | |
| Other payments deduction (if you reported income on line 147, see line 250 in the guide) | 250 | | | |
| Limited partnership losses of other years | 251 | | | |
| Non-capital losses of other years | 252 | | | |
| Net capital losses of other years | 253 | | | |
| Capital gains deduction | 254 | | | |
| Northern residents deductions (**attach** Form T2222) | 255 | | | |
| Additional deductions — Specify: | 256 | | | |
| Add lines 244 to 256. | 257 | | ► | |
| Line 236 minus line 257 (if negative, enter "0") — This is your **taxable income.** | | | 260 | 366,776.82 |

**Use your taxable income to calculate your federal tax on Schedule 1 and your provincial or territorial tax on Form 428.**

## Refund or balance owing

| | | |
|---|---|---|
| Net federal tax: enter the amount from line 65 of Schedule 1 (**attach** Schedule 1, even if the result is "0") | 420 | 91,542 90 |
| CPP contributions payable on self-employment and other earnings (**attach** Schedule 8 or Form RC381, whichever applies) | 421 | |
| Employment insurance premiums payable on self-employment and other eligible earnings (**attach** Schedule 13) | 430 | |
| Social benefits repayment (amount from line 235) | 422 | |
| **Provincial or territorial tax** (**attach** Form 428, even if the result is "0") | 428 | 45,461 47 |
| Add lines 420, 421, 430, 422, and 428. This is your **total payable.** | 435 | 137,004 37 • |

| | | | |
|---|---|---|---|
| Total income tax deducted | 437 | 171,481 52 • | |
| Refundable Quebec abatement | 440 | • | |
| CPP overpayment (enter your excess amount) | 448 | • | |
| Employment insurance overpayment (enter your excess amount) | 450 | • | |
| Refundable medical expense supplement (use the federal worksheet) | 452 | • | |
| Working income tax benefit (WITB) (**attach** Schedule 6) | 453 | • | |
| Refund of investment tax credit (**attach** Form T2038(IND)) | 454 | • | |
| Part XII.2 trust tax credit (box 38 of all T3 slips) | 456 | • | |
| Employee and partner GST/HST rebate (**attach** Form GST370) | 457 | • | |
| Tax **paid** by instalments | 476 | • | |
| **Provincial or territorial credits** (**attach** Form 479 if it applies) | 479 | • | |
| Add lines 437 to 479. These are your **total credits.** | 482 | 171,481 52 ▶ | 171,481 52 |
| Line 435 minus line 482. This is your **refund** or **balance owing.** | | | -34,477 15 |

If the result is negative, you have a **refund**. If the result is positive, you have a **balance owing**.
Enter the amount below on whichever line applies.

Generally, we do not charge or refund a difference of $2 or less.

**Refund** 484 34,477 15 •

**Balance owing** 485 •

**Amount enclosed** 486 •

Attach to page 1 a **cheque** or **money order** payable to the Receiver General, or make your payment online (go to **www.cra.gc.ca/mypayment**). Your payment is due no later than April 30, 2014.

**Direct deposit – Start or change (see line 484 in the guide)**

**You do not have to complete this area every year.** Do not complete it this year if your direct deposit information has not changed.

**Income tax refund, GST/HST credit and CCTB and any related provincial and territorial payments, WITB advance payments, any other deemed overpayment of tax, and UCCB.** To start direct deposit or to change account information, complete lines 460, 461, and 462 below.

By providing my banking information **I authorize** the Receiver General to deposit in the bank account number shown below **any amounts payable** to me by the CRA, until otherwise notified by me. I understand that this authorization will replace all of my previous direct deposit authorizations.

| Branch number | Institution number | Account number |
|---|---|---|
| 460 | 461 | 462 |
| (5 digits) | (3 digits) | (maximum 12 digits) |

Prepared solely for income tax purposes without audit or review from information provided by the taxpayer.

I certify that the information given on this return and in any documents attached is correct, complete, and fully discloses all my income.

**Sign here**

It is a serious offence to make a false return.

Telephone (250) 764-3121 Date 2014-03-19

490 **If a fee was charged for preparing this return, complete the following:**

Name of preparer: BDO Canada LLP

Telephone: (250) 763-6700

EFILE number (if applicable): 489 A2279

**Do not use this area** 487 488