



User ID and Password Request for Investor Web Inquiry

Please fax completed form to NexGen Financial 416-775-3704 or 866-378-7121

- ACTION REQUIRED:**
- Add new user
  - Delete user
  - Reset Password

**Required Information:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Account Number: \_\_\_\_\_

Social Insurance Number: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Entity ID (to be completed by NexGen): \_\_\_\_\_

\_\_\_\_\_  
Account Holder's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Joint Account Holder's Signature  
(if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
NexGen Approval

\_\_\_\_\_  
Date

**IFDS Use Only:**

Date Completed: \_\_\_\_\_