**CIBC Mortgage Prepayment – Quebec Class Action Settlement** 

Superior Court of Quebec Court File No. 500-06-000930-186

#### Must be postmarked or emailed no later than November 2, 2023

# **CLAIM FORM**

**CLAIMAINT CONTACT INFORMATION** 

First Name	Last Name		
Primary Address			
City	Province	Postal Code	
Email Address			
Telephone Number			]

This form and any supporting documents must be completed and submitted to the Claims Administrator by email or mail postmarked no later than November 2, 2023 at the following address:

CIBC Mortgage Prepayment Settlement <u>c/o Velvet Payments Inc.</u> 5900 Andover Ave. Suite 1 Montréal, Québec H4T 1H5

ird@velvetpayments.com

We recommend filing a claim online at the Settlement Website:

cibcirdsettlement.com

Please read the Notice (available at cibcirdsettlement.com) regarding the Settlement carefully before filling out this form. Terms in this Claim Form are defined in the Notice and the Settlement Agreement, both of which are available on the Settlement Website. We understand your mortgage loan information may not be easily available and, if that is the case, we ask you to complete the form to the best of your ability.

**Privacy Statement** 

#### 1. MORTGAGE LOAN INFORMATION

- 1.1. Who provided your mortgage loan? (select one)
  - □CIBC □Firstline Mortgages □President's Choice Financial □Other

#### 1.2. Mortgage Start Date or most recently renewed (**mm/yyyy**)

Do not leave blank. If the exact date is unknown, input approximate date.

#### 1.3. What was your mortgage loan number (if available)?

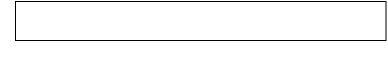
1.4. Was your mortgage for a fixed-term of 5 years or less at a fixed rate of interest.

□Yes □No

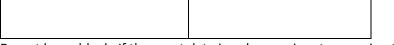
1.5. Did you pay a prepayment charge?

□Yes □No

1.6. What was the amount of your prepayment charge? Do not leave blank. If the exact amount is unknown, input approximate amount.



- 1.7. What was the interest rate applicable to your mortgage? Do not leave blank. If the exact rate is unknown, input approximate rate.
- 1.8. Date the mortgage loan was prepaid (mm/yyyy)



Do not leave blank. If the exact date is unknown, input approximate date.

**Privacy Statement** 

### 2. SPECIAL CIRCUMSTANCES (if applicable)

Have you prepaid your mortgage due to Special Circumstances as defined in the Settlement, namely due to (check off the appropriate box, if any)?

- 2.1. The death of a co-borrower, as documented by a certificate of death;
- 2.2. The divorce of the borrower from a co-borrower, as documented by a certificate of divorce; and/or
- 2.3. An incapacitating illness limiting the earning capacity of the borrower or co-borrower, as documented by a medical certificate or a certificate issued by an employer, an insurer or a governmental organization.

Where any of the above Special Circumstances occurred between the date of signature of your mortgage loan for which eligible Prepayment Charges were paid and **within 36 months** prior to the date of prepayment of that same mortgage loan. **If you want to qualify as having experienced Special Circumstances, you must provide the above-mentioned certificate with this Claim Form.** 

### 3. <u>SUPPORTING DOCUMENTATION (including discharge statement) (Optional, except in the case of Special</u> <u>Circumstances)</u>

I have included documentation that confirms the information in Section I or II.

□Yes □No

Document(s) Attached: \_\_\_\_\_

## 4. CLAIM CERTIFICATION & RELEASE

To obtain compensation under the Settlement, you must attest to the following certification:

- 1. I am a member of the Class or the authorized representative of a Class Member or Class Member's estate that is a member of the Class.
- 2. I confirm that all of the information in this Claim Form is true and correct.
- 3. I understand that by submitting this claim, I am authorizing the Claims Administrator to contact me or my representative as the Claims Administrator deems appropriate for more information and/or to audit my claim.
- 4. If Special Circumstances apply: I confirm that I had to prepay my mortgage due to one of the Special Circumstances mentioned above.

Signature

Print Name

Date (dd/mm/yyyy)

Privacy Statement

All information provided as part of this Claims Form is collected, used, disclosed and retained by the Claims Administrator for the purposes of administering the settlement of the above class proceeding, including evaluating eligibility status under the settlement.

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