Protection
For Your Business
Product Guide and Certificate of Insurance
For Business Credit Living Benefit Insurance
Protect What’s Important
Protection for your Business

Protect What’s Important

Product Guide and Certificate of Insurance

- **All coverages provided by:**
  Sun Life Assurance Company of Canada
  (“Sun Life”)
  Group Creditor Benefits
  227 King Street South
  P.O. Box 638, Station Waterloo
  Waterloo, Ontario
  Canada N2J 4B8

- **Administered by:**
  TD Life Insurance Company (“TD Life”)
  P.O. Box 1
  TD Centre
  Toronto, Ontario M5K 1A2
Why Business Credit Living Benefit Insurance?

- Protection for up to $1 million with a maximum of $500,000 towards Revolving Credit Products at competitive group rates
- Critical illness and disability benefits
- Ability to increase your coverage by up to $25,000 per calendar year without a new application, subject to coverage maximums and the Insured Person's eligibility for an increase (subject to the terms and conditions on page 24 under the section “Making a Change to Your Coverage”)
- Applying can be easy if you’re applying for less than $500,000 and you answer “No” to the health questions on the application

The following Credit Protection – What You Need to Know information sheet summarizes the insurance benefits. For complete details of coverage, please refer to the Certificate of Insurance in this booklet.
Who Is Eligible For Insurance

Business Credit Living Benefit Insurance is optional group insurance coverage for TD business credit customers who are Canadian residents.

You can apply for credit protection coverage if you are:

• between the ages of 18 and 55; and
• the owner or spouse of the owner of an unincorporated business;
• a director or officer of the business;
• a personal guarantor of some or all of the debt included in the Total Authorized Business Credit; or
• an employee whose contributions are essential to the business and without whom, the business would have difficulty operating; and
• Actively Working for wages or expectation of profit for the business on the date of Application. Spouse and guarantors who do not have an occupation or work with the business must be able to perform all Activities of Daily Living at the time of application; and
• not receiving or has not applied for disability payments, benefits or disability pension from any source, in the 24 months prior to applying for Business Credit Living Benefit Insurance.

See page 7 for details.

What Are The Benefits

When a claim is approved:

• The insurer can pay TD Bank up to $1,000,000, with a maximum of $500,000 towards Revolving Credit Products* if an Insured Person is diagnosed with a covered critical illness on or after the effective date of coverage.
• If an Insured Person becomes Totally Disabled, the insurer can pay a monthly benefit up to $3,000 for a maximum of 24 months per disability. Disability coverage under this policy is limited to a maximum of 48 months of benefit payments per Insured Person.

This includes payments towards:
✓ the outstanding balance of your total insured business credit products; and
✓ any interest owing

*Note: For a list of definitions of terms we’ve used, see section “Definitions of the Terms We’ve Used” on pages 30-32 in the Certificate of Insurance.

See pages 11-13 for details.

How Does The Coverage Work

Business Credit Living Benefit Insurance works like an umbrella to cover your Total Authorized Business Credit in the event an Insured Person becomes critically ill or Totally Disabled.

Critical Illness coverage covers you for the following: Cancer (life-threatening), Acute Heart Attack, and Stroke.
Disability coverage covers you for Total Disability due to an Accident or sickness.

Note: Critical Illness coverage is only offered with Disability coverage. Coverages are not offered separately.

When The Insurance Coverage Starts
- If coverage is less than $500,000 and you answered “NO” to all questions in the application, coverage takes effect on the date you applied for coverage; or
- If coverage is more than $500,000, or you answered “YES” to any of the questions in the application a separate Health Questionnaire is required. In this case, your coverage will take effect when we write to let you know that you’re approved.

When The Insurance Coverage Ends
Business Credit Living Benefit Insurance may end before your business credit is fully paid. Here are some examples of when coverage will end:
- your business credit is transferred to a different lender;
- your insurance premiums are in arrears for a total of 3 months while insured under this Certificate;
- the Insured Person is no longer associated with the business;
- Disability coverage ends when the Insured Person turns 65 years old, and Critical Illness coverage ends when the Insured Person turns 70 years old;
- When a Critical Illness coverage benefit is paid;
- We receive a request from you to cancel your coverage.

▶ See page 25 for details.

How To Cancel Coverage
You can cancel your coverage at any time. If you cancel your coverage within the first 30 days – and provided no claims have been made – your premiums will be refunded and your coverage will be considered to never have been in force. To cancel your insurance coverage, simply contact us at 1-888-983-7070.

How To Submit A Claim
For information on submitting a claim, call us at 1-888-983-7070 or see page 9 of the Certificate of Insurance for details.

When An Insurance Benefit Will Not Be Paid
Coverages have certain limitations and exclusions. Here some examples of when an insurance benefit will not be paid:
- an Insured Person gives any false or incomplete responses to any of the health questions. In this case the coverage will end.
- an Insured Person fails to accurately state their smoking status. In this case the coverage will end.
- an Insured Person is diagnosed with Cancer (life-threatening) within the first 90 days of the coverage start date. Should this happen, the coverage will end and premiums paid will be refunded.
- an Insured Person’s Total Disability occurs due to a pre-existing condition.

▶ See section “When We Will Not Pay Any Benefit and Terminate All Your Coverage” for more details & sections “When We Will Not Pay a Critical Illness Benefit” and “When We Will Not Pay a Disability Benefit” for more information on pre-existing conditions.
How To Calculate The Premium

The premium is calculated based on the Insured Person’s age at billing, gender, smoking status, and your average daily business credit outstanding balance, subject to the coverage maximums. Average daily business credit outstanding balance is calculated by averaging the daily balances of your insured business credit during the billing period.

Follow the steps in the following chart on page 3 and use the spaces to help calculate your monthly premium. This example provides a sample calculation for a 35 year old male, non-smoker, living in Ontario with Business Credit Living Benefit Insurance, with an average daily business credit outstanding balance of $100,000 and includes applicable provincial sales tax.†

<table>
<thead>
<tr>
<th>Step 1:</th>
<th>Premium Rate</th>
<th>Sample Calculation</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>$0.36</td>
<td>$0.36 \times 100,000 = $36</td>
</tr>
</tbody>
</table>

Follow step 4 only if provincial sales tax applies

See page 29 for details.

<table>
<thead>
<tr>
<th>Premium Rates</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Month</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-smoker ($)</td>
<td>Smoker ($)</td>
<td>Non-smoker ($)</td>
</tr>
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<td>-------</td>
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<tr>
<td>26 and under</td>
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<tr>
<td>45</td>
<td>0.78</td>
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</tr>
<tr>
<td>46</td>
<td>0.85</td>
<td>1.32</td>
</tr>
<tr>
<td>47</td>
<td>0.92</td>
<td>1.54</td>
</tr>
</tbody>
</table>

Disclosure Statement 3
Protecting Your Business

You’ve worked hard to build your business, it’s important to ensure your business is financially protected from a covered unexpected event. What would happen if you were to become critically ill or totally disabled? This valuable coverage can help ensure that your business’ financial obligations are met should the business owner, the spouse of the owner, a director, a personal guarantor or an employee essential to the operation of the business become critically ill or totally disabled.

This booklet describes the insurance provided to TD Canada Trust Small Business Banking customers and TD Commercial Banking customers who are covered by Business Credit Living Benefit Insurance. This insurance provides coverage for critical illness and disability.

More than one individual can be insured with Business Credit Living Benefit Insurance for the same business. Please note: separate applications are required for each person insured.

Once you’re insured, the insurance benefit can pay down or eliminate your insured TD Canada Trust business credit balance, including your business loans, lines of credit, TD Business Credit Cards and overdraft protection.

Business Credit Living Benefit Insurance offers competitive group premium rates, based on age, gender and smoking status of the person being insured. Premium rates automatically increase with age, as shown in the premium rate table in this guide. See section “How To Calculate The Premium” for details.
Contents

Certificate Of Insurance

Introduction to Your Insurance Coverage ................................................................. 6
  Who We Pay The Benefits To .................................................................................. 7
  Who Is Eligible For Coverage ............................................................................... 8
  Misstatement of Age and Gender ......................................................................... 9
  How To Apply ......................................................................................................... 9
  How To Submit A Claim ......................................................................................... 9
  We Must Receive A Claim Within A Specific Time ............................................. 9
  Additional Claim Information ............................................................................. 10

Coversages
  How Much You Are Covered For .......................................................................... 11
  Partial Coverage .................................................................................................. 13
  When Your Coverage Starts ............................................................................... 14
  When You Must Complete a Health Questionnaire .......................................... 14
  When We Will Not Pay Any Benefit, and Terminate Your Coverage .................. 14
  Critical Illness Coverage ..................................................................................... 15
  Minimum and Maximum Critical Illness Coverage Amounts ......................... 15
  How a Critical Illness Benefit is Determined and Paid ......................................... 15
  When We Will Not Pay a Critical Illness Benefit ............................................. 16
  Definitions Applicable To Critical Illness Coverage ........................................ 17
  Disability Coverage ............................................................................................. 18
  Disability Maximum Benefit Amounts .............................................................. 18
  How a Disability Benefit is Determined and Paid ............................................. 18
  Your Business Credit Account Payments While Receiving Disability Benefits ... 20
  When We Will Not Pay a Disability Benefit .................................................... 21
  When Your Disability Insurance Benefit Payments End .................................... 22
  Definitions Applicable To Disability Coverage ............................................... 22
  Making a Change to Your Coverage .................................................................. 24
  When Your Business Credit Living Benefit Insurance Coverage Ends ............ 25

Premium Information for Business Credit Living Benefit Insurance .................... 27
  What Your Coverage Costs .................................................................................. 27
  Premium Rates .................................................................................................... 27
  How To Calculate Your Premium ....................................................................... 29
  Definitions of the Terms We’ve Used ................................................................. 30

Commonly Asked Questions About Business Credit Living Benefit Insurance .... 33

Privacy Agreement ................................................................................................. 35

Your Privacy Is Protected – A Message From Sun Life ....................................... 40
Certificate of Insurance

Pages 6 to 32 of this booklet form the Certificate of Insurance and apply to you and any Insured Person covered by Business Credit Living Benefit Insurance.

Note: In this Certificate of Insurance, you and your refer to the business identified in the Application who is/are insured under the Policy. We, us and our refer to Sun Life Assurance Company of Canada (“Sun Life”) or TD Life Insurance Company (“TD Life”), as applicable.

All coverages are insured by Sun Life under group Policy # 45073. TD Life acts as an administrator for Sun Life.

TD Bank doesn’t act as an agent for Sun Life. Neither company has any ownership interest in the other. TD Bank is not an agent for its wholly owned subsidiary, TD Life. TD Bank receives a fee from Sun Life and TD Life for its activities, including enrollment under this coverage.

Introduction to Your Insurance Coverage

Business Credit Living Benefit Insurance provides Critical Illness and Disability coverages as described below:

• For Critical Illness coverage, we will pay TD Bank a benefit amount towards your insured business credit products in the event an Insured Person is diagnosed with Cancer (life-threatening), Acute Heart Attack, or Stroke (see page 17 of the Certificate of Insurance for the definitions of covered critical illnesses).

• For Disability coverage, we will pay TD Bank a monthly benefit amount towards your insured business credit products in the event an Insured Person becomes Totally Disabled (see page 23 of the Certificate of Insurance for the definitions of Totally Disabled).

The maximum Critical Illness coverage that you can apply and be insured for is $1,000,000, with a maximum of $500,000 coverage towards your Revolving Credit Products. The maximum Disability coverage amount is a monthly benefit equal to the lesser of $3,000 or 1% of your total insured business credit outstanding balance. The maximum benefit period is 24 months per disability, up to a maximum of 48 monthly Disability payments per Insured Person.

These limits apply to the sum of all insured TD Canada Trust business credit. If the total of all your business credit exceeds these maximums, partial coverage can be offered.
The terms and conditions of your coverage under the Policy consist of:

- your Application;
- your Certificate of Insurance included in this booklet;
- your Notification of Change Form, if required;
- any other documents we require you to submit;
- your answers to questions we may ask you in considering your coverage, whether communicated verbally, in writing or electronically; and
- any written confirmation of coverage we may provide you.

In addition, subject to applicable law, you or a person making a claim on your behalf may request a copy of:

- your Application;
- your Certificate of Insurance;
- any other documents we require you to submit; and
- your answers to questions we may ask you in considering your coverage, whether communicated verbally, in writing, or electronically.

You or the person making a claim on your behalf may request copies of any of these documents by contacting us at 1-888-983-7070.

**Who We Pay The Benefits To**

When a claim is approved, we will pay the benefits as follows:

- For Critical Illness and Disability claims, payment will be made to TD Bank to pay towards the outstanding balance under your Total Authorized Business Credit.

For more information, please refer to section “Coverages”.

To determine the dollar amount of a claim please refer to the “How a Critical Illness Benefit is Determined and Paid” and “How a Disability Benefit is Determined and Paid” sections of this Certificate of Insurance.
Who is Eligible for Coverage

Businesses

Business Credit Living Benefit Insurance coverage is offered exclusively to business credit customers of TD Bank that are a sole proprietorship, partnership, non-public corporation or other entity operating a business or farm.

Insured Persons

If you want to insure more than one person on your insured business credit, each person must complete and submit a separate Application.

On the date an Application is completed and submitted, the Insured Person must be a Canadian resident between 18 and 55 years old, and any one of the following:

- if the business is unincorporated, a person who owns the business;
- if the business is unincorporated, the spouse of a person who owns the business;
- a director or officer of the business;
- a personal guarantor of some or all of the debt included in the Total Authorized Business Credit; or
- an employee whose contributions are essential to the business entity and without whom the business would have difficulty operating.

The Insured Person must also:

- be Actively Working on the date of Application for wages or expectation of profit. Actively Working or Actively at Work means carrying out the regular duties of the Insured Person’s occupation, at least 20 hours a week, for wages or expectation of profit. The Insured Person must also be carrying out these duties in Canada, and for the business. Spouse and guarantors who do not have an occupation or work with the business must be able to perform all Activities of Daily Living at the time of application; and
- must not have applied for or received disability payments, benefits or disability pension from any source, in the 24 months prior to applying.

A Canadian resident is any person who:

- has lived in Canada for a total of 183 days or more within the last year (days do not need to be consecutive); or
- is a member of the Canadian Forces.
Misstatement of Age and Gender

If a Certificate of Insurance is issued on an Insured Person based on an incorrect age, the following may apply:

• If the Insured Person is still eligible for insurance, the premium amount will be adjusted to the correct amount based on the correct date of birth at the Insured Person’s effective date; and
  ■ If overpaid, we will refund the excess premiums calculated at the time a claim is made against this Certificate of Insurance; or
  ■ If underpaid, we will decrease the benefit amount by the amount underpaid at the time a claim is made against this Certificate of Insurance;
• If the Insured Person is not eligible for insurance, all coverages under this Policy will be considered never to have been in force and we will refund all premiums paid.

If a Certificate of Insurance is issued to an Insured Person based on an incorrect gender, the following may apply:

• The premium amount will be adjusted to the correct amount based on the correct gender at the Insured Person’s effective date and:
  ■ If overpaid, we will refund the excess premiums calculated at the time a claim is made against this Certificate of Insurance; or
  ■ If underpaid, we will decrease the benefit amount by the amount underpaid at the time a claim is made against this Certificate of Insurance.

How to Apply

To apply for coverage, you must complete and submit an Application.

How To Submit A Claim

Claim forms are available by calling us at 1-888-983-7070 or by visiting any TD Canada Trust Branch.

We Must Receive A Claim Within A Specific Time

• For a Critical Illness claim, you must submit a written claim to us within one year of the Insured Person being diagnosed with a covered Critical Illness. You will also need to provide written proof from a qualified physician practicing in Canada, of the diagnosis of a covered Critical Illness.
• For a Disability claim, you must submit your claim within 6 months of the date the Insured Person becomes Totally Disabled.

We will not pay any claims that are made after these deadlines.

We may also require:

• additional proof or information regarding the claim;
• the Insured Person to be examined by a physician of our choice to validate a claim; or
• both.

We will only pay benefits after these requirements are satisfied.

**Additional Claim Information**

• You are limited to one claim for Critical Illness. If we pay any Critical Illness benefit on your insured business credit products, Critical Illness and Disability coverages will end for the Insured Person;

• You are responsible for continuing to pay your insurance premiums and regular business credit payments during the Disability benefit payment.

• We describe how we determine the amount of your benefit in the sections “How a Critical Illness Benefit is Determined and Paid” and “How a Disability Benefit is Determined and Paid”.

• Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta and British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), or other applicable legislation.
Coverages

How Much You Are Covered For

You can apply to insure all (full coverage) or part (partial coverage) of your Total Authorized Business Credit, subject to the coverage maximums.

Total Authorized Business Credit is the sum of your business loans, TD Business Credit Cards, lines of credit and overdraft protection after TD Bank advances the funds and includes the following:

- The current loan amount for business loans (including Business Mortgages).
- The credit limit amount for business lines of credit, business overdraft protection or TD Business Credit Card.

Business Credit products not included in the Total Authorized Business Credit and therefore not covered:

- TD Venture Line of Credit® Visa* Card;
- Any standalone Letters of Credit, Letters of Guarantee, or U.S. Dollar Business Credit facilities that are not part of a Commercial Line of Credit;
- Reserve Loans.

The following example illustrates how to calculate your Total Authorized Business Credit:

<table>
<thead>
<tr>
<th>If you have the following debt:</th>
<th>Your Total Authorized Business Credit will equal:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The credit limit on your business line of credit is $700,000 (included);</td>
<td>$600,000</td>
</tr>
<tr>
<td>• The outstanding balance on your business loan is $100,000 (included); and</td>
<td></td>
</tr>
<tr>
<td>• Letter of Credit for $33,000 (not included)</td>
<td></td>
</tr>
<tr>
<td>Since the maximum coverage offered for a business line of credit is $500,000, your total coverage is for $600,000 ($500,000 for the business line of credit plus $100,000 for the business loan).</td>
<td></td>
</tr>
</tbody>
</table>
Total Authorized Business Credit would be the maximum benefit that you are eligible for, subject to your approved coverage amount. Critical Illness or Disability benefits will be based on your total insured business credit outstanding balance as of the date of diagnosis of a covered Critical Illness or date of Total Disability. Please refer to sections “How a Critical Illness Benefit is Determined and Paid” and “How a Disability Benefit is Determined and Paid” for details.

As a general rule, a business credit is only insured if there is a balance outstanding on the day the benefit is calculated, except if:

- you enter into an Agreement of Purchase and Sale for a business asset such as real estate or equipment; and
- TD Bank commits to advance funds to pay for the business asset; and
- the Insured Person suffers from a covered Critical Illness or becomes Totally Disabled which would be covered under this Certificate of Insurance after it comes into effect, but before the funds are advanced.

In such case, if TD Bank subsequently advances the funds with respect to the business asset, the amount of that business loan or business mortgage will be included in the outstanding balance for the purpose of the calculation of benefits. The benefit in this case will be limited to $500,000 only.

Your Business Credit Living Benefit Insurance is based on the amount of insurance you applied for, and the Total Authorized Business Credit amount. If you have full coverage, your Critical Illness and Disability coverage automatically reduces as the Total Authorized Business Credit reduces.

If the Total Authorized Business Credit is later increased, you can apply to increase your coverage (See “Making A Change To Your Coverage” page 24). If you have partial coverage, your Business Credit Living Benefit Insurance coverage will not change as long as it remains below the Total Authorized Business Credit.

Your Business Credit Living Benefit Insurance coverage equals the lesser of:

- your Total Authorized Business Credit amount;
- the amount of insurance applied for in the Application;
- insurance coverage from the previous day where your Total Authorized Business Credit has been increased but not the Business Credit Living Benefit Insurance coverage; or
- $1,000,000 with a maximum of $500,000 towards Revolving Credit Product(s). If the business has one or more Revolving Credit Products, then the $500,000 maximum coverage will be applied to the sum of all your Revolving Credit Products.
For Example:

1. If you have a business line of credit with a $100,000 limit, and you insured all of it, your maximum Business Credit Living Benefit Insurance coverage will remain fixed at $100,000.

2. If you have a business line of credit with a $100,000 limit and a business loan with a balance of $100,000 at the time you applied for insurance and you insured all of it, your initial Business Credit Living Benefit Insurance coverage would be $200,000. If during the course of the year the outstanding balance of your business loan reduced to $75,000, your maximum Business Credit Living Benefit Insurance coverage would automatically have reduced to $175,000.

3. If under example 2 you had only applied for $100,000 in insurance, your maximum Business Credit Living Benefit Insurance coverage would have remained fixed at $100,000.

We know it can take time to access your business credit. Therefore, during the initial 180 days from coverage taking effect, your coverage will fluctuate up and down as your Total Authorized Business Credit fluctuates (up to the amount of insurance you applied for).

Once your coverage takes effect, you can apply to increase or decrease your coverage, as described in the section “Making A Change To Your Coverage”. If you do so and we accept your change request, your Business Credit Living Benefit Insurance coverage will be increased or decreased by the approved amount.

Partial Coverage

We may offer you partial Business Credit Living Benefit Insurance coverage under the following two scenarios:

- If the total of all your Total Authorized Business Credit is equal to or less than $1,000,000, you may apply for partial coverage in the amount you choose; or

- If your Total Authorized Business Credit exceeds $1,000,000, you can apply for partial coverage in the amount you choose, but the maximum cannot exceed $1,000,000. For Revolving Credit Products, the maximum coverage is $500,000.

In this case, your partial coverage amount will be a portion of all your Total Authorized Business Credit borrowings.
When Your Coverage Starts

If you meet all eligibility requirements, coverage will take effect as follows:

- If coverage is less than $500,000 and you answered “NO” to all questions in the Application, coverage takes effect on the date you applied for coverage; or

- If the coverage requested for all your insured business credit combined is greater than $500,000, or you answered “YES” to any of the questions in the Application a separate Health Questionnaire is required. In this case, your coverage will take effect when we write you to let you know that you’re approved.

When You Must Complete a Health Questionnaire

The Insured Person will need to complete a Health Questionnaire if the Application contains a “YES” response to any of the questions (Section: “Information About Your Application and Your Health”) or if the amount of coverage requested for all your insured business credit combined is greater than $500,000.

We will review your Application and let you know by mail if you are approved for the coverage you applied for.

If a Health Questionnaire is required and not submitted, coverage will not take effect.

When We Will Not Pay Any Benefit, and Terminate Your Coverage

- the Insured Person failed to accurately answer the question: “Have you smoked any product or used any substance or product containing tobacco, nicotine or marijuana within the last 12 months?” in the Application;

- you or the Insured Person give any false or incomplete responses to requests for information that we require to approve your insurance*;

- you or the Insured Person give any false or incomplete information when requesting any change to your coverage*; or

- If the Insured Person’s diagnosis of Cancer (life-threatening) or investigation leading to a diagnosis occurs within 90 days of the Insured Person’s coverage effective date. In this case, we will refund any premiums paid.

*This applies to the responses in your Application and to any other information we receive from you, whether in writing, electronically or by telephone.
Critical Illness Coverage

Critical Illness covers the following conditions: Cancer (life-threatening), Acute Heart Attack, and Stroke.

Minimum and Maximum Critical Illness Coverage Amounts

Critical Illness provides coverage for your insured business credit product(s). The minimum amount of coverage you can apply for is $5,000. The total maximum Critical Illness coverage amount is $1,000,000 with a maximum of $500,000 towards a Revolving Credit Product(s). If the business has two or more Revolving Credit Products, then the maximum of $500,000 will be applied to the sum of all Revolving Credit Products.

How a Critical Illness Benefit is Determined and Paid

Once coverage is in effect, in the event an Insured Person is diagnosed with Cancer (life-threatening), Acute Heart Attack, or Stroke, upon approval of a claim, we will pay a benefit to TD Bank.

We will determine the amount payable as of the date of diagnosis.

The maximum Critical Illness coverage amount payable is $1,000,000, with a maximum of $500,000 towards a Revolving Credit Product(s). If the business has two or more Revolving Credit Products, then the maximum of $500,000 will be applied to the sum of all the Revolving Credit Products. The total claim amount payable is equal to the lesser of:

- The total insured business credit outstanding balance on the date of diagnosis, subject to the coverage maximum; or
- The sum of your insured:
  - Business loan(s) outstanding balance; and
  - The average statement balance for a Revolving Credit Product(s). This average is calculated from the statement balances 12 months immediately prior to the date of diagnosis.

For Example:

- At the date of the Insured Person’s diagnosis, the outstanding balance on your insured business loan is $100,000.
- At the date of Insured Person’s diagnosis, the statement balance on your insured business line of credit is $75,000 where the monthly statement balances for the prior 12 months of your insured business line of credit are listed in the table below.
- The total amount payable will be $125,833.33 ($100,000 + $25,833.33).
### Business LOC Statement balance ($) 

<table>
<thead>
<tr>
<th>Month</th>
<th>Jan</th>
<th>Feb</th>
<th>Mar</th>
<th>Apr</th>
<th>May</th>
<th>Jun</th>
<th>Jul</th>
<th>Aug</th>
<th>Sep</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
</tr>
</thead>
<tbody>
<tr>
<td>Value</td>
<td>5,000</td>
<td>6,000</td>
<td>7,000</td>
<td>8,000</td>
<td>9,000</td>
<td>10,000</td>
<td>15,000</td>
<td>25,000</td>
<td>35,000</td>
<td>50,000</td>
<td>65,000</td>
<td>75,000</td>
</tr>
</tbody>
</table>

### Average business LOC Statement balance 

\[
\text{Average} = \frac{5,000 + 6,000 + 7,000 + 8,000 + 9,000 + 10,000 + 15,000 + 25,000 + 35,000 + 50,000 + 65,000 + 75,000}{12} = 25,833.33
\]

### Insurance benefit paid 

\[
\text{Insurance Benefit} = 100,000 + 25,833.33 = 125,833.33
\]

The benefit date is the date when the outstanding balance is used to determine the amount of insurance payable. The benefit date is determined by the date of diagnosis.

The **Critical Illness** benefit will be first applied to your insured business loan(s) followed by your insured Revolving Credit Product(s) consisting of business line of credit(s) and/or business overdraft protection. Any remaining benefit amount will then be applied towards your insured TD Business Credit Card account(s).

### When We Will Not Pay A Critical Illness Benefit

- If the **Insured Person**’s diagnosis of a covered **Critical Illness** occurs within 24 months of the effective date of your coverage and is a result of an illness or condition for which the **Insured Person** had symptoms or received medical consultation, treatment, care or services, including prescribed medication, during the 24 months prior to the effective date of your **Critical Illness** coverage (this is called a “**pre-existing condition**”). If you increase your coverage, the pre-existing condition will apply during the 24 months prior to the effective date of the coverage increase;

- If your claim is a result of an **Insured Person**’s use of illegal or illicit drugs or substances;

- If your claim is the result of an **Insured Person**’s misuse of medication obtained with or without a prescription; or

- If the **Insured Person** fails to attend an independent medical examination arranged by the insurer.
Definitions Applicable To Critical Illness Coverage

Acute Heart Attack: the death of a portion of your heart muscle resulting from inadequate blood supply for which the following test results are confirmed:

- An increase of cardiac bio-markers and/or enzymes found in the blood stream, as a result of damaged heart muscle tissue, to levels considered diagnostic for an acute myocardial infarction.

Diagnosis of the Acute Heart Attack must be made by a qualified cardiac specialist.

Acute Heart Attack does not include:

- an incidental finding of ECG changes suggesting a prior myocardial infarction with no corroborating event;
- an increase of cardiac bio-markers and/or enzymes due to coronary angioplasty (a medical procedure involving the ballooning of a narrowed coronary artery) unless there are new elevations of ST segments in the involved ECG leads considered diagnostic for an acute myocardial infarction; or
- an increase of cardiac bio-markers and/or enzymes in the blood stream due to pericarditis or myocarditis.

Cancer (life-threatening): a life-threatening tumour characterized by the uncontrollable growth and spread of malignant cells.

Cancer (life-threatening) does not include:

- carcinoma in situ;
- malignant melanoma to a depth of .75mm or less;
- skin Cancer that has not spread beyond the deepest layer of the skin;
- Kaposi’s sarcoma;
- Stage A (T1A or T1B) prostate Cancer; or
- any diagnosis or investigation leading to a diagnosis, which occurs within 90 days of when your coverage starts.

Stroke: a cerebrovascular event producing neurological sequelae lasting more than 30 consecutive days and caused by thrombosis, hemorrhage or embolism from an extra-cranial source, and for which there is evidence of measurable, objective neurological deficit.

Stroke does not include:

- Transient Ischemic Attacks
Disability Coverage:

Disability is coverage that pays a monthly benefit in the event an Insured Person becomes Totally Disabled.

Disability Maximum Benefit Amounts

The maximum Disability benefit offered on your insured business credit products is $3,000 monthly, for a maximum of 24 months per disability. Disability coverage under this Policy is limited to a maximum of 48 months of benefit payments per Insured Person. In the event an Insured Person is Totally Disabled, we will pay a monthly benefit towards your insured business credit products after the Elimination Period, subject to any limitations set out in this Certificate of Insurance. You will not be paid a Disability benefit and no benefit will accrue during this period.

How a Disability Benefit is Determined and Paid

When an insurance benefit is paid, monthly benefit payments will be made towards your insured business credit product(s), subject to the coverage maximums. The monthly benefit will be calculated as 1% of the lesser of:

- The total insured business credit outstanding balance as of the date the Insured Person becomes Totally Disabled, subject to the coverage maximum; or
- The sum of your insured:
  - Business loan(s) outstanding balance; and
  - The average statement balance for a Revolving Credit Product(s). This statement average is calculated from the 12 months immediately prior to the date the Insured Person becomes Totally Disabled.

These limits apply to the sum of all of your TD Bank business credit products insured with this coverage.

For Example:

- On the date the Insured Person becomes Totally Disabled, the outstanding balance on your insured business loan is $100,000.
- On the date the Insured Person becomes Totally Disabled, the total outstanding balance on your business line of credit is $75,000 where the total insured monthly statement balances for the prior 12 months are listed in the table below.
- The total balance will be $125,833.33.
- The total monthly Disability benefit amount payable will be $1,258.33 as calculated in the following table.
<table>
<thead>
<tr>
<th>Business LOC balance ($)</th>
<th>Jan</th>
<th>Feb</th>
<th>Mar</th>
<th>Apr</th>
<th>May</th>
<th>Jun</th>
<th>Jul</th>
<th>Aug</th>
<th>Sep</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>5,000</td>
<td>6,000</td>
<td>7,000</td>
<td>8,000</td>
<td>9,000</td>
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<td>15,000</td>
<td>25,000</td>
<td>35,000</td>
<td>50,000</td>
<td>65,000</td>
<td>75,000</td>
</tr>
</tbody>
</table>

**Average business LOC Statement balance**

\[
\frac{(5,000 + 6,000 + 7,000 + 8,000 + 9,000 + 10,000 + 15,000 + 25,000 + 35,000 + 50,000 + 65,000 + 75,000)}{12} = 25,833.33
\]

**Total balance**

\[100,000 + 25,833.33 = 125,833.33\]

**Monthly Insurance benefit paid**

\[1\% \times 125,833.33 = 1,258.33\]

If an *Insured Person* is only *Totally Disabled* for a portion of any month, benefit payments will be prorated accordingly.

When a monthly *Disability* benefit is paid, the amount, subject to the coverage maximum, will be deposited to your *TD Canada Trust* business chequing account. If you do not have a *TD Canada Trust* business chequing account, the benefit amount will be applied to the insured business credit product(s).

**Note:** If any of your insured business credit products included in your *Total Authorized Business Credit* is in delinquent status, the *Disability* benefit will be paid first towards the insured business credit product in a delinquent status.

During the period that we pay *Disability* benefits:

- The *Insured Person* must be under the continuous care of a doctor licensed to practice medicine in Canada; and
- The *Insured Person* cannot be doing any work for pay or expectation of profit; or
- If the *Insured Person* is a spouse of the owner or guarantor of the insured business credit and does not have an occupation or is not *Actively Working* for the business, then they must be unable to perform 2 out of the 6 Activities of Daily Living. (For the complete list of Activities of Daily Living, see section “Definitions Applicable to Disability Coverage” on page 22)

Additionally:

- If we determine that the *Insured Person* has recovered and is no longer *Totally Disabled*, we will stop paying benefits.
• In the event the Insured Person’s Total Disability recurs, you may submit an additional Disability claim, up to the maximum of 24 monthly payments, subject to the conditions stated below.

• If the Insured Person’s Total Disability recurs from the same or related cause and the Insured Person is again Totally Disabled within 180 days of the date the benefit payments ended, we will waive the Elimination Period, which is 30 consecutive days after being Totally Disabled, and resume paying benefits until a total of 24 monthly Disability payments have been paid, including payments prior to the recurrence period.

• However, if the Insured Person’s Total Disability recurs later than 180 days after the date the benefit payments ended, provided that the Insured Person had been back to work for a 180-day period, or satisfied all the Activities of Daily Living conditions in the case of a spouse of the owner of the business or guarantor, we will treat it as a new claim.

• If the Insured Person suffers a Total Disability from a different cause, we will treat it as a new claim and a new Elimination Period will apply.

If more than one Insured Person becomes Totally Disabled at the same time, we will pay benefits up to a maximum of two Insured Persons simultaneously. In this case, we will pay monthly benefits up to a maximum of the lesser of $3,000 or 1% of the total insured business credit outstanding balance per claim.

In no circumstance will the monthly Disability benefit payment exceed the maximum coverage amounts.

If any of your insured business credit products under your Total Authorized Business Credit are closed while you are receiving Disability benefit payments, your Disability benefit payment will be reduced accordingly.

Your Business Credit Account Payments While Receiving Disability Benefits

Since the Disability benefit is the lesser of $3,000/month or 1% of the total insured business credit outstanding balance, the Disability benefit paid may be less than the regular business credit payments required for your insured business credit products. The payment date of the monthly Disability benefits may not coincide with the date of regular business credit account payments.

You are responsible for making the regular business credit account payments during the time a Disability claim is active for an Insured Person.
When We Will Not Pay A Disability Benefit

- if the Insured Person’s Total Disability occurs before that Insured Person’s coverage starts;
- if the Insured Person’s Total Disability occurs within 24 months of the effective date of coverage, and is the result directly or indirectly of a medical condition, sickness or injury for which medical advice, consultation, or treatment was received during the 24 months prior to the effective date of coverage (this is called a “pre-existing condition”). If you increase your coverage, the pre-existing condition will apply during the 24 months prior to the effective date of the coverage increase;
- if the Insured Person’s Total Disability is a result of a normal pregnancy;
- if the Insured Person’s Total Disability is the result of the operation or control of any motorized vehicle or watercraft with blood alcohol concentration in excess of legal limits in the applicable jurisdiction;
- if the Insured Person’s Total Disability results from events directly or indirectly relating to, arising from or following the Insured Person’s participation or attempted participation in a criminal offence;
- if the Insured Person’s Total Disability is a result of the Insured Person’s intentional self-inflicted injury;
- if the Insured Person is not Actively at Work due to job loss, strike, or layoff;
- if the Insured Person is confined in a prison or a similar institution;
- if the Insured Person becomes Totally Disabled as a result of elective cosmetic surgery or experimental surgery or Treatment;
- if the Insured Person is not under the active and continual care of a Physician, or is not following the appropriate treatment prescribed by the Insured Person’s Physician;
- if the Insured Person is a spouse of the owner or guarantor of the insured business credit who did not satisfy the Actively at Work requirement and was not able to perform all the Activities of Daily Living at the time of Application;
- if the Insured Person’s claim is not made within 6 months of the date of the Insured Person’s Total Disability;
- if Total Disability occurs after the Insured Person turn 65 years of age;
- if more than two Insured Persons are Totally Disabled at the same time; in this case, we will only pay benefits for the first two Insured Persons who become Totally Disabled;
• if the Insured Person’s maximum of 24 months of Disability benefits has been reached for a single claim, or
• if the Insured Person has reached the maximum of 48 monthly Disability benefit payments. In this case, only Critical Illness coverage will continue.

When Your Disability Insurance Benefit Payments End

Approved Disability benefit payments will end on the earliest of the following dates:

• the date the Total Disability ends or the Insured Person returns to work;
• the date the Insured Person becomes engaged in any business, occupation or undertaking for wages or expectation of profit;
• the date that 24 months of Disability benefit payments have been made on the claim;
• the date that 48 months of Disability benefit payments have been made for an Insured Person;
• the date of the Insured Person’s death;
• the date the Insured Person is no longer under the active and continuous care of a Physician, or is not following the treatment prescribed by their Physician;
• the date the Insured Person fails to attend an independent medical examination arranged by the insurer;
• the date the Insured Person fails to provide proof of continuing Total Disability to the insurer; or
• the date the Business Credit Living Benefit Insurance coverage ends (see ‘When Your Business Credit Living Benefit Insurance Coverage Ends’).

Definitions Applicable To Disability Coverage

Accident: a violent, sudden and unexpected action from an external source but does not include injuries resulting either directly or indirectly from any illness, medical condition or congenital defect, regardless of:

• whether the illness or condition arose before or after your coverage starts;
• how you came to suffer from the illness or condition; or
• whether the illness, condition or defect or resulting injury was expected or unexpected.
**Disability**: coverage if an Insured Person becomes Totally Disabled as more fully described in the “Disability Coverage” section.

**Elimination Period**: the first 30 consecutive days that the Insured Person is unable to perform all or substantially all of the duties of the Insured Person’s occupation before the Insured Person became Totally Disabled. You will not be paid a Disability benefit and no benefit will accrue during this period.

In the case of a spouse of the owner or guarantor of the insured business credit, this means that the benefit will only be paid if the Total Disability lasts more than 30 complete and consecutive days, starting on the date the Insured Person became Totally Disabled.

**Totally Disabled/Total Disability**: means that due to Accident or sickness:

- during the first 30 consecutive days, the Insured Person is unable to perform all or substantially all of the duties of the Insured Person's occupation before the Insured Person became disabled. This is called the Elimination Period. You will not be paid a Disability benefit and no benefit will accrue during this period;

- for the first 12 months following the Elimination Period, the Insured Person is unable to perform all or substantially all of the duties of the Insured Person’s occupation before the Insured Person became disabled.

- after the first 12 months of benefits, the Insured Person is completely unable to engage in any occupation for which the Insured Person’s education, training or experience qualifies the Insured Person.

- If the Insured person is a spouse of the owner or guarantor of the insured business credit and does not have an occupation or work for the business, Totally Disabled/Total Disability means that due to Accident or sickness, the Insured Person requires active and continuous care of a physician and is unable to perform 2 out of the 6 Activities of Daily Living.

**Activities of Daily Living** – The basic activities are:

- **Bathing** – the ability to wash oneself in the bathtub, shower or by sponge bath, with or without the aid of assistive devices

- **Dressing** – the ability to put on and remove necessary clothing, braces, artificial limbs, or other surgical appliances with or without the aid of assistive devices
• **Toileting** – the ability to get on and off the toilet and maintain personal hygiene with or without the aid of assistive devices

• **Bladder and Bowel continence** – the ability to manage bowel and bladder function with or without protective undergarments or surgical appliances so that a reasonable level of hygiene is maintained

• **Transferring** – the ability to move in and out of a bed, chair or wheelchair, with or without the aid of assistive devices

• **Feeding** – the ability to consume food or drink that already has been prepared and made available, with or without use of assistive devices

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**Making a Change To Your Coverage**

If you are requesting a change, it will take effect on the first billing period following the date we receive the completed Notification of Change Form.

**How You Can Increase Your Coverage**

*Business Credit Living Benefit Insurance* allows you to increase your coverage up to $25,000 once in a calendar year without a new Application, based on the eligibility requirements. To apply for this increase option, you must provide us with a completed *Notification of Change Form*. This option cannot be accumulated from year to year and cannot exceed your *Total Authorized Business Credit* with *TD Bank* or the maximum of $1,000,000 per *Insured Person* under this *Policy*. If the business has two or more *Revolving Credit Products*, then the maximum of $500,000 will be applied to the sum of all *Revolving Credit Products*.

If you want to increase your coverage by more than $25,000, you must complete a new Application.

All Applications or Notification of Change Forms for an increase in coverage are subject to our underwriting practices in place at the time you submit an Application. We reserve the right to change our underwriting requirements and the questions in the Application at any time.

The pre-existing condition applies to any increased amount applied for under any Notification of Change Form. For more details on the pre-existing condition for Critical Illness and Disability coverage, please refer to the sections; “When We Will Not Pay A Critical Illness Benefit” and “When We Will Not Pay A Disability Benefit”.

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24 Protection For Your Business
Coverage cannot be increased while an Insured Person is Totally Disabled and receiving monthly Disability benefits.

Coverage cannot be increased if the Insured Person has applied for or received disability payments, benefits or disability pension from any source, in the prior 24-month period.

If the Insured Person has completed 48 months of Disability benefit payments for the existing coverage, then a new Application is required for any further increase in coverage.

**How Your Coverage Can Decrease**

If you apply to decrease your coverage by completing the relevant section of the Notification of Change Form, we will adjust the coverage amount and re-calculate your premium, effective the first billing period following the date we receive this form.

In addition, if you reduce your Total Authorized Business Credit below the Business Credit Living Benefit Insurance coverage, your coverage will automatically decrease as described in the section “How Much You are Covered For”.

**How to Make a Change to Your Smoking Status**

If we were originally told the Insured Person was a smoker and it has been 12 months or more since the Insured Person last smoked or used any substance or product containing tobacco, nicotine, or marijuana, you can apply for non-smoker rates by having the Insured Person complete a Notification of Change Form.

**When Your Business Credit Living Benefit Insurance Coverage Ends**

Critical Illness coverage ends on the Insured Person’s 70th birthday.

Disability coverage ends without notice to you on the Insured Person’s 65th birthday. Disability coverage will also end when we pay 48 months of Disability benefit payments to your insured business credit.

Your Critical Illness and Disability coverages on your Total Authorized Business Credit will end without notice to you on the date when any of the following occurs:

- The Insured Person is no longer associated with the business, or no longer meets the eligibility requirements;
- A diagnosis of Cancer (life-threatening) or investigation leading to a diagnosis occurs within 90 days of your coverage taking effect;
• We receive a written request from you to cancel your coverage or, if we are able to confirm your identity, we receive your request by telephone to cancel coverage under the following conditions:
  ■ A person with signing authority on the business must provide consent to cancel their own coverage or the coverage of an Insured Person;
  ■ A person with signing authority on the business cannot cancel coverage of another signing authority;
• Your insured business credit is paid in full, refinanced, discharged or assumed by another person*;
• Your insured business credit is transferred to another financial institution*;
• The date your insurance premiums are in arrears for a total of three months while insured under this Certificate;
• TD Bank starts legal proceedings against you concerning your insured business credit *;
• We pay any Critical Illness insurance benefit to your insured business credit;
• 30 days after we or TD Canada Trust gives you written notice of the termination of the Policy*.
*This will end Business Credit Living Benefit Insurance coverages for all Insured Persons.

When your insurance coverage ends for any reason, we will not notify the other person(s) liable to TD Bank for the Total Authorized Business Credit. We will refund any premiums we may owe you after your coverage ends.
What Your Coverage Costs

How premiums work:

• The rate used to calculate your premiums is based on the Insured Person’s age at billing, gender, and smoking status.

• To be eligible to apply for non-smoker rates, the Insured Person must not have smoked or used any substance or product containing tobacco, nicotine or marijuana within the last 12 months of your effective date.

• Provincial sales taxes are added to your premiums, if applicable.

Critical Illness coverage will continue and your premiums will not be adjusted when an Insured Person’s Disability coverage ends for the following reasons:

• The Insured Person turns 65 years of age; or

• The Insured Person reaches the maximum Disability benefit payment of 48 months

Your premiums are based on the following:

• the average of the daily outstanding balance during the billing period; and

• the monthly premium rates per $1,000 of average daily business credit outstanding balance as shown on the following chart.

The billing period runs from the 11th calendar day of the previous month to the 10th calendar day of the current month. Premiums are due on the 15th calendar day of the month or next business day.

These rates do not include provincial sales taxes.

Every year, on the first billing following the Insured Person’s birthday, you move up to the next premium rate shown.

If we increase the rates, the increase will apply to everyone covered. We’ll let you know in advance before making any changes to the rates.

Premium Rates

Monthly premium rates per $1,000 of average daily business credit outstanding balance are shown in the chart on the following page.
<table>
<thead>
<tr>
<th>Age at billing</th>
<th>Male Non-smoker ($)</th>
<th>Male Smoker ($)</th>
<th>Female Non-smoker ($)</th>
<th>Female Smoker ($)</th>
</tr>
</thead>
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<tr>
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<td>0.25</td>
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</tr>
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<td>4.62</td>
<td>8.75</td>
<td>3.04</td>
<td>6.33</td>
</tr>
<tr>
<td>64</td>
<td>5.00</td>
<td>9.39</td>
<td>3.23</td>
<td>6.71</td>
</tr>
<tr>
<td>65</td>
<td>5.50</td>
<td>10.01</td>
<td>3.42</td>
<td>7.80</td>
</tr>
<tr>
<td>66</td>
<td>5.86</td>
<td>10.56</td>
<td>3.58</td>
<td>8.19</td>
</tr>
<tr>
<td>67</td>
<td>6.22</td>
<td>11.07</td>
<td>3.74</td>
<td>8.59</td>
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<tr>
<td>68</td>
<td>6.58</td>
<td>11.56</td>
<td>3.92</td>
<td>9.06</td>
</tr>
<tr>
<td>69</td>
<td>6.95</td>
<td>12.02</td>
<td>4.11</td>
<td>9.54</td>
</tr>
</tbody>
</table>
How To Calculate Your Premium

To calculate your monthly premium:
1. Find the rate that applies to the Insured Person in the premium rate table;
2. Multiply it by the average daily business credit outstanding balance;
3. Divide the answer by 1,000; and
4. Add applicable provincial sales taxes.

Average daily business credit outstanding balance is calculated by averaging the daily balances of your insured business credit during the billing period.

For Example:
You are a 35 year old male, non-smoker and you have a business loan that has an average balance for the month equal to $100,000. Your monthly insurance premium would be:

<table>
<thead>
<tr>
<th>Living Benefit Premium Calculation Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1: Premium rate</td>
</tr>
<tr>
<td>Step 2: Average daily business credit outstanding balance</td>
</tr>
<tr>
<td>Step 3: Average daily business credit outstanding balance divided by 1000</td>
</tr>
<tr>
<td>Step 4: Applicable PST</td>
</tr>
</tbody>
</table>

Monthly premium of $38.88.

In the above example, if your business loan has an average balance of $100,000 and you have partial coverage of $50,000, the premiums will be calculated on the lesser of your coverage amount and average business credit outstanding balance. In this case, the premium would be calculated using your $50,000 coverage amount as it is the lesser amount.

<table>
<thead>
<tr>
<th>Living Benefit Premium Calculation Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1: Premium rate</td>
</tr>
<tr>
<td>Step 2: Average daily business credit outstanding balance</td>
</tr>
<tr>
<td>Step 3: Average daily business credit outstanding balance divided by 1000</td>
</tr>
<tr>
<td>Step 4: Applicable PST</td>
</tr>
</tbody>
</table>

Monthly premium of $19.44.

Your Payments
We will withdraw your insurance premiums, plus any applicable sales taxes, on the 15th calendar day of the month, or the next business day from the account indicated on the Application.
### Definitions Of The Terms We’ve Used

The Certificate of Insurance used the following terms, which are identified in *italics*:

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
</table>
| Accident           | a violent, sudden and unexpected action from an external source but does not include injuries resulting either directly or indirectly from any illness, medical condition or congenital defect, regardless of:  
• whether the illness or condition arose before or after your coverage starts;  
• how you came to suffer from the illness or condition; or  
• whether the illness, condition or defect or resulting injury was expected or unexpected. |
| Acute Heart Attack | the death of a portion of your heart muscle resulting from inadequate blood supply for which the following test results are confirmed:  
• an increase of cardiac bio-markers and/or enzymes found in the blood stream, as a result of damaged heart muscle tissue, to levels considered diagnostic for an acute myocardial infarction.  
Diagnosis of the Acute Heart Attack must be made by a qualified cardiac specialist.  
Acute Heart Attack does not include:  
• an incidental finding of electrocardiogram changes suggesting a prior myocardial infarction with no corroborating event;  
• an increase of cardiac bio-markers and/or enzymes due to coronary angioplasty (a medical procedure involving the ballooning of a narrowed coronary artery) unless there are new elevations of ST segments in the involved electrocardiogram leads considered diagnostic for an acute myocardial infarction; or  
• an increase of cardiac bio-markers and/or enzymes in the blood stream due to pericarditis or myocarditis. |
| Activities of Daily Living | – The basic activities are:  
• **Bathing** – the ability to wash oneself in the bathtub, shower or by sponge bath, with or without the aid of assistive devices  
• **Dressing** – the ability to put on and remove necessary clothing, braces, artificial limbs, or other surgical appliances with or without the aid of assistive devices  
• **Toileting** – the ability to get on and off the toilet and maintain personal hygiene with or without the aid of assistive devices  
• **Bladder and Bowel continence** – the ability to manage bowel and bladder function with or without protective undergarments or surgical appliances so that a reasonable level of hygiene is maintained  
• **Transferring** – the ability to move in and out of a bed, chair or wheelchair, with or without the aid of assistive devices  
• **Feeding** – the ability to consume food or drink that already has been prepared and made available, with or without use of assistive devices |
| Actively Working/Actively at Work | Actively Working or Actively at Work means carrying out the regular duties of the Insured Person’s occupation, at least 20 hours a week, for wages or expectation of profit. |
| Application | the completed written, printed, electronic and/or telephone Application for Business Credit Living Benefit Insurance, including the Health Questionnaire, if applicable. |
| **Business Credit Living Benefit Insurance** | Critical Illness and Disability coverage as described in this Certificate of Insurance and provided under the Policy. |
| **Cancer (life-threatening)** | A life-threatening tumour characterized by the uncontrollable growth and spread of malignant cells. Cancer (life-threatening) does not include:  
  - Carcinoma in situ;  
  - Malignant melanoma to a depth of 0.75mm or less;  
  - Skin Cancer that has not spread beyond the deepest layer of skin;  
  - Kaposi’s sarcoma  
  - Stage A (T1A or T1B) prostate Cancer; or  
  - Any diagnosis or investigation leading to a diagnosis, which occurs within 90 days of when your coverage starts |
| **Critical Illness** | coverage for Cancer (life-threatening), Acute Heart Attack or Stroke, as more fully described in the “Critical Illness coverage” section. |
| **Disability** | coverage if you become Totally Disabled as more fully described in the “Disability coverage” section |
| **Elimination Period** | The first 30 consecutive days that the Insured Person is unable to perform all or substantially all of the duties of the Insured Person's occupation before the Insured Person became Totally Disabled. You will not be paid a Disability Benefit and no benefit will accrue during this period.  
In the case of a spouse of the owner or guarantor of the insured business credit, this means that the benefit will only be paid if the Total Disability lasts more than 30 complete and consecutive days, starting on the date the Insured Person became Totally Disabled |
| **Health Questionnaire** | the detailed questionnaire that must be completed if the Insured Person answers “Yes” to any of the health questions on the Application or if coverage requested for all your insured business credit combined is greater than $500,000. |
| **Insured Person(s)** | the person(s) identified in the Application who is/are insured under this Certificate of Insurance. |
| **Notification of Change Form** | the form that is completed by you or TD Bank when requesting changes to a customer’s existing insurance coverage. |
| **Policy** | group Policy #45073 between Sun Life and TD Bank, which is administered by TD Life and provides your Business Credit Living Benefit Insurance coverage |
| **Revolving Credit Product** | Credit Products with credit that automatically renews as debts are paid down. This includes Business Line of Credit, Business Overdraft Protection and TD Business Credit Card |
| **Stroke** | a cerebrovascular event producing neurological sequelae lasting more than 30 consecutive days and caused by thrombosis, hemorrhage or embolism from an extra-cranial source, and for which there is evidence of measurable, objective neurological deficit. 
  
  Stroke does not include:  
  -Transient Ischemic Attacks |
<table>
<thead>
<tr>
<th>TD Bank</th>
<th>The Toronto-Dominion Bank.</th>
</tr>
</thead>
<tbody>
<tr>
<td>TD Canada</td>
<td>TD Bank and those of its affiliates that provide business credit for your loans, lines of credit and overdraft protection.</td>
</tr>
<tr>
<td>Trust</td>
<td></td>
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</tbody>
</table>

**Total Authorized Business Credit**

the sum of your business loans, lines of credit and overdraft protection with TD Bank as follows:

- for business loans (including Business Mortgages), the current amount of the approved loan;
- for business lines of credit, business overdraft protection or TD Business Credit Card, the credit limit.

Business Credit products not included in the **Total Authorized Business Credit** and therefore not covered:

- TD Venture Line of Credit® Visa*;
- Any stand-alone Letters of Credit, Letters of Guarantee, or U.S. Dollar Business Credit facilities that are not part of a Commercial Line of Credit;
- Reserve Loans.

**Totally Disabled/Total Disability**

Totally Disabled/Total Disability: means that due to Accident or sickness:

- during the first 30 consecutive days, the *Insured Person* is unable to perform all or substantially all of the duties of the *Insured Person’s* occupation before the *Insured Person* became disabled. This is called the *Elimination Period*. You will not be paid a *Disability* benefit and no benefit will accrue during this period.
- for the first 12 months following the *Elimination Period*, the *Insured Person* is unable to perform all or substantially all of the duties of the *Insured Person’s* occupation before the *Insured Person* became disabled.
- after the first 12 months of benefits, the *Insured Person* is completely unable to engage in any occupation for which the *Insured Person’s* education, training or experience qualifies the *Insured Person*.
- If the *Insured person* is a spouse of the owner or guarantor of the insured business credit and does not have an occupation or work for the business, *Totally Disabled/Total Disability* means that due to Accident or sickness, the *Insured Person* requires active and continuous care of a physician and is unable to perform 2 out of the 6 *Activities of Daily Living*.

**You and your**

the Business who is/are insured under the *Policy*.

**We, us and our**

Sun Life or TD Life, as applicable.

This is the end of the Certificate of Insurance.
The pages that follow contain helpful information about your coverage.
Commonly Asked Questions

About Business Credit Living Benefit Insurance

Is Business Credit Living Benefit Insurance Mandatory?

Business Credit Living Benefit Insurance is entirely optional. You aren’t required to have this insurance to obtain any TD Canada Trust products or services. But remember the benefits. If an Insured Person were to suffer from a covered Critical Illness or become Totally Disabled, Business Credit Living Benefit Insurance can provide you with important financial coverage for your business credit obligations.

Can You Sign Up At Any Time?

Yes. There are no time constraints preventing you from taking advantage of coverage to protect your business. We will be pleased to provide you with a Business Credit Living Benefit Insurance Application, simply visit a TD Canada Trust Branch or call us.

What If You Change Your Mind?

Your satisfaction and financial security are important to us. That’s why we offer a 30-day review period. If for any reason you are dissatisfied with your Business Credit Living Benefit Insurance, you may cancel it within 30 days, your premiums will be refunded and your coverage will be considered to never have been in force. If a claim is made within the first 30 days, a refund is not provided.

To Cancel By Phone

You can call TD Life at 1-888-983-7070 and, if we are able to confirm your identity, you will be able to cancel your coverage. In this case, your cancellation will start as soon as we complete the call.

To Cancel By Written Request

You can obtain a cancellation form by requesting one by calling TD Life. Please send the form to the address at the back of this booklet. If you cancel your coverage by written request, we will honour your request on the date we receive it. We will refund any premiums we may owe you have paid after your coverage has ended.

If an Insured Person is no longer associated with the business, the business must inform TD Bank and submit a cancellation form to cancel the coverage for the Insured Person.
Can Your Insurance End Before You Pay Off The Debt?
There are situations where your coverage may end before you pay off the balance in full and close your business credit. For example, your insurance will end when the Insured Person turns 70 years old or your insurance premiums are in arrears for a total of three months while insured under this Certificate.
Please refer to the section “When Your Business Credit Living Benefit Insurance Coverage Ends” in this booklet for more information.

How Can You Be Sure Your Personal Information Is Confidential?
Your right to privacy is important to us. No information is shared without your written approval. In your Business Credit Living Benefit Insurance Application, you’ve agreed to share information as described in the attached Privacy Agreement.
We also ask you to authorize TD Life to share any non health-related information about you with our affiliates so they may offer you other products and services and maintain a business relationship with you. You may withdraw this permission to share information at any time by contacting TD Life at 1-888-983-7070.

Can I Cover Only One Of My Credit Products?
No. Business Credit Living Benefit Insurance works like an umbrella to cover your Total Authorized Business Credit, subject to the coverage maximums. Coverage is not based on individual products. However, you can apply for partial coverage to cover a portion of your Total Authorized Business Credit.

Does The Coverage Cancel Automatically If An Insured Business Owner Or Other Essential Person Were To Leave The Business?
Once issued, coverage remains in force until one of the events listed in section “When Your Business Credit Living Benefit Insurance Coverage Ends” occurs. If the Insured Person is no longer associated with the business, a cancellation form is required to end their coverage.

Who Do I Contact For More Information?
For information or questions on your Business Credit Living Benefit Insurance, please contact us at 1-888-983-7070.
Privacy Agreement

In this Agreement, the words “you” and “your” mean any person, or that person’s authorized representative, who has requested from us, or offered to provide a guarantee for, any product, service or account offered by us in Canada. The words “we”, “us” and “our” mean TD Bank Group (“TD”). TD includes The Toronto-Dominion Bank and its world-wide affiliates, which provide deposit, investment, loan, securities, trust, insurance and other products or services. The word “Information” means personal, financial and other details about you that you provide to us and we obtain from others outside TD, including through the products and services you use.

You acknowledge, authorize and agree as follows:

Collecting And Using Your Information

At the time you request to begin a relationship with us and during the course of our relationship, we may collect Information including:

- details about you and your background, including your name, address, contact information, date of birth, occupation and other identification
- records that reflect your dealings with and through us
- your preferences and activities.

This Information may be collected from you and from sources within or outside TD, including from:

- government agencies and registries, law enforcement authorities and public records
- credit reporting agencies
- other financial or lending institutions
- organizations with whom you make arrangements, other service providers or agents, including payment card networks
- references or other information you have provided
- persons authorized to act on your behalf under a power of attorney or other legal authority
- your interactions with us, including in person, over the phone, at the ATM, on your mobile device or through email or the Internet
- records that reflect your dealings with and through us.

You authorize the collection of Information from these sources and, if applicable, you authorize these sources to give us the Information.
We will limit the collection and use of Information to what we require in order to serve you as our customer and to administer our business, including to:

- verify your identity
- evaluate and process your Application, accounts, transactions and reports
- provide you with ongoing service and information related to the products, accounts and services you hold with us
- analyze your needs and activities to help us serve you better and develop new products and services
- help protect you and us against fraud and error
- help manage and assess our risks, operations and relationship with you
- help us collect a debt or enforce an obligation owed to us by you
- comply with applicable laws and requirements of regulators, including self-regulatory organizations.

**Disclosing Your Information**

We may disclose Information, including as follows:

- with your consent
- in response to a court order, search warrant or other demand or request, which we believe to be valid
- to meet requests for information from regulators, including self-regulatory organizations of which we are a member or participant, or to satisfy legal and regulatory requirements applicable to us
- to suppliers, agents and other organizations that perform services for you or for us, or on our behalf
- to payment card networks in order to operate or administer the payment card system that supports the products, services or accounts you have with us (including for any products or services provided or made available by the payment card network as part of your product, services or accounts with us), or for any contests or other promotions they may make available to you
- on the death of a joint account holder with right of survivorship, we may release any information regarding the joint account up to the date of death to the estate representative of the deceased, except in Quebec where the liquidator is entitled to all account information up to and after the date of death
- when we buy a business or sell all or part of our business or when considering those transactions
• to help us collect a debt or enforce an obligation owed to us by you
• where permitted by law.

Sharing Information Within TD
Within TD we may share Information world-wide, other than health-related Information, for the following purposes:

• to manage your total relationship within TD, including servicing your accounts and maintaining consistent Information about you
• to manage and assess our risks and operations, including to collect a debt owed to us by you
• to comply with legal or regulatory requirements.

You may not withdraw your consent for these purposes.

Within TD we may also share Information world-wide, other than health-related Information, to allow other businesses within TD to tell you about products and services. In order to understand how we use your Information for marketing purposes and how you can withdraw your consent, refer to the Marketing Purposes section below.

Additional Collections, Uses And Disclosures

Social Insurance Number (SIN) – If requesting products, accounts or services that may generate interest or other investment income, we will ask for your SIN for revenue reporting purposes. This is required by the Income Tax Act (Canada). If we ask for your SIN for other products or services, it is your option to provide it. When you provide us with your SIN, we may also use it as an aid to identify you and to keep your Information separate from that of other customers with a similar name, including through the credit granting process. You may choose not to have us use your SIN as an aid to identify you with credit reporting agencies.

Credit Reporting Agencies and Other Lenders – For a credit card, line of credit, loan, mortgage or other credit facility, merchant services, or a deposit account with overdraft protection, hold and/or withdrawal or transaction limits, we will exchange Information and reports about you with credit reporting agencies and other lenders at the time of and during the application process, and on an ongoing basis to review and verify your creditworthiness, establish credit and hold limits, help us collect a debt or enforce an obligation owed to us by you, and/or manage and assess our risks. You may choose not to have us conduct a credit check in order to assess an application for credit. Once you have such a facility or product with us and for a reasonable period of time afterwards, we may from time to time disclose
your Information to other lenders and credit reporting agencies requesting such Information, which helps establish your credit history and supports the credit granting and processing functions in general. We may obtain Information and reports about you from Equifax Canada Inc., Trans Union of Canada, Inc. or any other credit reporting agency. You may access and rectify any of your personal information contained in their files by contacting them directly through their respective websites www.consumer.equifax.ca and www.transunion.ca.

Once you have applied for any credit product with us, you may not withdraw your consent to this exchange of Information.

**Fraud** – In order to prevent, detect or suppress financial abuse, fraud, criminal activity, protect our assets and interests, assist us with any internal or external investigation into potentially illegal or suspicious activity or manage, defend or settle any actual or potential loss in connection with the foregoing, we may collect from, use and disclose your Information to any person or organization, fraud prevention agency, regulatory or government body, the operator of any database or registry used to check information provided against existing information, or other insurance companies or financial or lending institutions. For these purposes, your Information may be pooled with data belonging to other individuals and subject to data analytics.

**Insurance** – This section applies if you are applying for, requesting prescreening for, modifying or making a claim under, or have included with your product, service or account, an insurance product that we insure, reinsure, administer or sell. We may, collect, use, disclose and retain your Information, including health-related Information. We may collect this Information from you or any health care professional, medically-related facility, insurance company, government agency, organizations who manage public information data banks, or insurance information bureaus, including MIB Group, Inc. and the Insurance Bureau of Canada, with knowledge of your Information.

With regard to life and health insurance, we may also obtain a personal investigation report prepared in connection with verifying and/or authenticating the information you provide in your application or as part of the claims process.

With regard to home and auto insurance, we may also obtain Information about you from credit reporting agencies at the time of, and during the application process and on an ongoing basis to verify your creditworthiness, perform a risk analysis and determine your premium.

We may use your Information to:

- determine your eligibility for insurance coverage
- administer your insurance and our relationship with you
• determine your insurance premium
• investigate and adjudicate your claims
• help manage and assess our risks and operations.

We may share your Information with any health-care professional, medically-related facility, insurance company, organizations who manage public information data banks, or insurance information bureaus, including the MIB Group, Inc. and the Insurance Bureau of Canada, to allow them to properly answer questions when providing us with Information about you. We may share lab results about infectious diseases with appropriate public health authorities.

If we collect your health-related Information for the purposes described above, it will not be shared within TD, except to the extent that a TD company insures, reinsures, administers or sells relevant coverage and the disclosure is required for the purposes described above. Your Information, including health-related Information, may be shared with administrators, service providers, reinsurers and prospective insurers and reinsurers of our insurance operations, as well as their administrators and service providers for these purposes.

Marketing Purposes – We may also use your Information for marketing purposes, including to:

• tell you about other products and services that may be of interest to you, including those offered by other businesses within TD and third parties we select
• determine your eligibility to participate in contests, surveys or promotions
• conduct research, analysis, modeling, and surveys to assess your satisfaction with us as a customer, and to develop products and services
• contact you by telephone, fax, text messaging, or other electronic means and automatic dialing-announcing device, at the numbers you have provided us, or by ATM, internet, mail, email and other methods.

With respect to these marketing purposes, you may choose not to have us:

• contact you occasionally either by telephone, fax, text message, ATM, internet, mail, email or all of these methods, with offers that may be of interest to you
• contact you to participate in customer research and surveys.

Telephone and Internet discussions – When speaking with one of our telephone service representatives, internet live chat agents, or messaging with us through social media, we may monitor and/or record our discussions for our mutual protection, to enhance customer service and to confirm our discussions with you.
More Information

This Agreement must be read together with our Privacy Code, which includes our Online Privacy Code and our Mobile Apps Privacy Code. You acknowledge that the Privacy Code forms part of the Privacy Agreement. For further details about this Agreement and our privacy practices, visit www.td.com/privacy or contact us for a copy.

You acknowledge that we may amend this Agreement and our Privacy Code from time to time. We will post the revised Agreement and Privacy Code on our website listed above. We may also make them available at our branches or other premises or send them to you by mail. You acknowledge, authorize and agree to be bound by such amendments.

If you wish to opt-out or withdraw your consent at any time for any of the opt-out choices described in this Agreement, you may do so by contacting us at 1-888-983-7070. Please read our Privacy Code for further details about your opt-out choices.

Your Privacy is Protected – A Message From Sun Life

Respecting your privacy is a priority for the Sun Life Financial group of companies. We keep in confidence personal information about you and the products and services you have with us to provide you with investment, retirement and insurance products and services to help you meet your lifetime financial objectives. To meet these objectives, we collect, use and disclose your personal information for purposes that include: underwriting; administration; claims adjudication; protecting against fraud, errors or misrepresentations; meeting legal, regulatory or contractual requirements; and we may tell you about other related products and services that we believe meet your changing needs. The only people who have access to your personal information are our employees, distribution partners such as advisors, and third-party service providers, along with our reinsurers. We will also provide access to anyone else you authorize. Sometimes, unless we are otherwise prohibited, these people may be in countries outside Canada, so your personal information may be subject to the laws of those countries. You can ask for the information in our files about you and, if necessary, ask us in writing to correct it. To find out more about our privacy practices, visit www.sunlife.ca/privacy.
Please ask us
If you have any questions about your Business Credit Living Benefit Insurance, we'd like to hear from you. You can contact your nearest TD Canada Trust branch, or call TD Life at 1-888-983-7070.

Write to us
TD Life Insurance Company
P.O. Box 1
TD Centre
Toronto, Ontario M5K 1A2

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