Services aux Autochtones Canada

TREATY ANNUITY PAYMENT REQUEST

Privacy statement

The collection, use and disclosure of personal information by the Treaty Annuities Program is authorized under the Indian Act (https://laws-lois.justice.gc.ca/eng/acts/i-5/), and is in accordance with the requirements of the Privacy Act (https://laws-lois.justice.gc.ca/eng/acts/P-21/index.html). Information collected will be used exclusively for the purpose of administration for the payment of treaty annuities. Personal information will be retained pursuant to the Privacy Act and its Regulations. The collection of information is described in the Treaty Annuities Personal Information Banks PSU 931 and AANDC PPU-009 located in the departmental Info Source publication, online at Info Source (https://www.sac-isc.gc.ca/eng/1353081939455). Individuals have the right to the protection of, access to and request the correction of their personal information under the Privacy Act. If you require clarification concerning the Privacy Statement, please contact the Departmental Access to Information and Privacy Office at 1-819-997-8277 or by email at aadnc.upvp-ppu.aandc@canada.ca. For more information on privacy issues, your right to file a complaint and the Privacy Act in general, you can consult the Privacy Commissioner at 1-800-282-1376.

Important

- This form must be completed and submitted each time an annuity is requested, and must be accompanied by all required supporting
 documents and information.
- By completing and submitting this form, the total amount of the annuity owed to the individuals (for whom information is provided below) will be disbursed, including any arrears.
- Required documents: A photocopy of both sides of a valid Certificate of Indian Status (CIS) card or Secure Certificate of Indian Status (SCIS) card (also known as 'registration' or 'status' cards) for all whom treaty annuity funds are being requested (including dependent children and/or guardianship).
- If you do not have a valid CIS or SCIS card available, any other valid government issued identification which has your signature is acceptable. A photocopy of both sides must be included with the form.
- If requesting payment on behalf of minors in your custody for whom you are the legal guardian, provide a photocopy of proof of guardianship.
- Individuals who are 18 or older must complete their own payment request form. To request payment on behalf of dependents that are 18 or older, please include proof of guardianship with the form.
- · A single lump-sum payment of the combined annuity amounts owed to all individuals listed on this form will be issued to applicant.
- Email submission: If submitting via email, photographs of the signed form, cards and any other identification and documents are accepted if attached to the email. All information is mandatory except as noted.

| ► Complete sections 1 to 5. | | | | | | | | |
|--|--------------------------|----------------------------|---------|-----------------------|-------------------------------|----------------|-------------------------|--|
| 1- First Nation region | | | | | | | | |
| Select the region in which your F | irst Natio | on is located (see section | 6 for r | egional conta | act information). | | | |
| Quebec | Ontario | | 0 | Manitoba | Saskatchewan | | | |
| Alberta | British Columbia | | 0 | Northwest | t Territories | | | |
| 2 - Applicant mailing address and contact information (all information must be current.) | | | | | | | | |
| Family name | | Given name | | | Mailing address (nu | mber, street, | apartment, P.O. box) | |
| City/Town | Province/Territory (Cana | | nada) | | Postal / ZIP Code State (USA) | | | |
| Email address | | | | | Telephone number | (only if email | address is unavailable) | |
| 3 - Treaty annuitant information (individuals for whom treaty annuity funds are being requested) | | | | | | | | |
| Family name | | Given name | 771177 | e of birth YYMMDD) | First Nation Registration | | Registration no. | |
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| Tanada Canada Cana | ada | Page 2 of | | | | |
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| 4 - Payment method (choose ONE of th | e following payment options) | | | | | |
| Payment method ► 4(A) Cheque (p | payment will be mailed via cheque onoted in page 1, section 2) | deposit (Canadian bank accounts only) | | | | |
| 4(A) Cheque method Complete section 2. OR | | | | | | |
| 4(B) Direct deposit method | | | | | | |
| (1) Submit a personal cashier cheque Note: Your online banking may ha with your financial institution for d OR | ave a printable direct deposit form which you may in | clude instead of a void cheque. Inquire | | | | |
| (2) The financial institution completes Note: Bank stamp is required | s the banking information below. | | | | | |
| Banking information (completed by financial | institution) | | | | | |
| Transit number | Institution number | Bank stamp | | | | |
| Account number | Financial institution name | | | | | |
| Account holder name | Joint account holder name (if applicable) | | | | | |
| 5 - Authorization (completed by ALL app | l plicants; to be signed ONLY once Sections 1 to 4 are | e completed.) | | | | |
| ▶ If the bank account identified in 4(B) is a | joint account, BOTH account holders MUST sign th | is form. | | | | |
| ▶ I, the undersigned, request that any treaty annuity funds which are payable to me and/or the minor children in my care and custody whom I have listed on this form, are to be sent to me using the information above. By signing below I authorize consent for the collection of personal information for the administration for the payment of treaty annuities. | | | | | | |
| Signature of applicant | Date (YYYYMMDD) Signature of joint account hold | der (if applicable) Date (YYYYMMDD) | | | | |
| Checklist (ensure all sections have been prop | erly completed before submitting) | | | | | |
| Section 1: Signature included | | vidual treaty annuitant is correctly listed | | | | |
| Section 3: Applicant contact information | on is provided Section 4: The pays | ment method is chosen and a bank stamp included | | | | |
| 6 - Submission | | | | | | |
| | notocopies of identification documents to the region | | | | | |
| QUEBEC Indigenous Services Canada CSQ Building 400-320 St. Joseph Street East Québec QC G1K 9J2 Telephone: (800) 567-9604 QcConformiteQcConformity@sac-isc.gc.ca | ONTARIO Indigenous Services Canada 100 Anemki Place Suite 101 Fort William First Nation ON P7J 1A5 Telephone: (807) 623-3534 On.treatypayments@sac-isc.gc.ca | MANITOBA Indigenous Services Canada 200-365 Hargrave Street Winnipeg MB R3B 3A3 Telephone: (800) 567-9604 mb.treatypayments@sac-isc.gc.ca | | | | |
| SASKATCHEWAN Indigenous Services Canada 1827 Albert Street Regina SK S4P 2S9 Telephone: (306) 780-5392 govskadmin@sac-isc.gc.ca | ALBERTA Indian Moneys, Estates and Treaty Annuities 630-9700 Jasper Avenue Edmonton AB T5J 4G2 Telephone: (780) 495-2773 Ab.treatypayments@sac-isc.gc.ca | BRITISH COLUMBIA Indigenous Services Canada 600-1138 Melville Street Vancouver BC V6E 4S3 Telephone: (604) 775-5100 Bc.treatypayments@sac-isc.gc.ca | | | | |
| NORTHWEST TERRITORIES Crown-Indigenous Relations and Northern Affairs Canada P.O. Box 1500 Yellowknife NT X1A 2R3 Telephone: (867) 669-2500 Nwt.treatypayments@rcaanc-cirnac.gc.ca | CENTRAL OFFICES (OTTAWA) ISC Central Offices can accept any general inquiries or questions, but please send your completed application form to the region in which your First Nation is located. Indigenous Services Canada Public Enquiries Contact Centre 10 Wellington Street Gatineau QC K1A 0H4 treatypay-paiementdetraite@sac-isc.gc.ca | | | | | |