

Protection for your Business

Distribution Guide and
Certificate of Insurance

**For Business Credit Living
Benefit Insurance**

Protect What's Important



Protection for your Business

Protect What's Important

Distribution 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

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 Your Premium" for details.

Distribution Guide

Name of Insurance Product:

Business Credit Living Benefit Insurance

Type of Insurance Product:

Group Creditor Business Credit Living Benefit Insurance

Name and Address of Insurers:

- Business Credit Living Benefit coverage 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 N2J 4B8

- Administered by:**
 TD Life Insurance Company
 P.O. Box 1
 TD Centre
 Toronto, Ontario M5K 1A2
 Toll Free Phone: 1-888-983-7070
 Toll Free Fax: 1-866-534-5534

- Name and Address of Distributor:**
 TD Canada Trust*
 500 Rue St Jacques St
 12th Floor
 Montreal, QC CAN H2Y1S1
 Phone 1-888-983-7070
 Fax 1-866-534-5534

*TD Canada Trust means The Toronto-Dominion Bank and its affiliates that provide business credit for loans, lines of credit and overdraft protection.

Responsibility of the Autorité des marchés financiers

The Autorité des marchés financiers does not express an opinion on the quality of the product offered in this guide. The Insurers alone are responsible for any discrepancies between the wording of the guide and the policy.

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In this Distribution Guide, you and your refers to the Business who is/are insured under the Policy.

Introduction

This Distribution Guide describes the *Business Credit Living Benefit Insurance* offered to *TD Canada Trust* customers who are applying for new business credit or have an existing business credit product. It will help *you* make a knowledgeable decision about whether this coverage suits *your* needs.

The terms and conditions of this insurance product are contained in the Certificate of Insurance and in the group insurance policy. Any coverage will be governed by the Certificate of Insurance and by the group insurance policy.

About the Insurers

Business Credit Living Benefit Insurance provides *Critical Illness* and *Disability* coverage. All coverages are provided by Sun Life Assurance Company of Canada (“Sun Life”) under group *Policy #45073* issued to The Toronto-Dominion Bank and administered by TD Life Insurance Company (“TD Life”)

References to the Insurer, *we*, *us* and *our* refer to Sun Life or TD Life, as applicable. The Toronto-Dominion Bank is also referred to hereafter as *TD Bank*.

Description of the Products Offered

Nature of the Coverage

For definitions of all italicized terms in this Distribution Guide, please refer to the “Definitions of the Terms Used” section on page 20.

Business Credit Living Benefit Insurance includes *Critical Illness* and *Disability* coverage, and can pay a benefit equal to *your* outstanding balance under *your Total Authorized Business Credit* up to a maximum of \$1 million.

Business Credit Living Benefit Insurance includes the following benefits for *your* insured business credit product(s), which can include *TD Canada Trust* Business loans, lines of credit, TD Business Credit Cards and overdraft protection:

- **Critical Illness** provides coverage if an *Insured Person* is diagnosed with:
 - *Cancer (life-threatening)*
 - *Acute Heart Attack*; or
 - *Stroke*

The maximum *Critical Illness* coverage amount payable is \$1,000,000, with a limit of \$500,000 towards a *Revolving Credit Product(s)*.

- **Disability** coverage can provide a monthly benefit amount to *you* in the event an *Insured Person* becomes *Totally Disabled*. The maximum *Disability* benefit amount 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*.

For a further explanation on the above, please refer to the “Coverages” section beginning on page 31 of the Certificate of Insurance.

Summary of Specific Features

Persons Who May Apply for This Protection

Businesses

Business Credit Living Benefit Insurance coverage is offered exclusively to business credit customers of *TD Canada Trust* that are: a sole proprietorship, partnership, non-public corporation or other entities operating a business or farm. The business credit eligible for *Business Credit Living Benefit Insurance* is:

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

The sum of *your* business loans, lines of credit, TD Business Credit Card and overdraft protection with *TD Canada Trust* is called the “*Total Authorized Business Credit*”.

Insured Persons

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. The spouse of

the owner and guarantors who do not have an occupation or work for the business must be able to perform all *Activities of Daily Living* at the time of *Application*; **and**

- Not have applied for or received disability payments, benefits or disability pension from any source, in the 24 months prior to applying.

Confirmation of Insurance and Effective Date of Coverage

If:

- *your* business credit application is approved;
- *your* business credit has been effected;
- *you* have met the eligibility requirements to apply for insurance;
- *you* have submitted *your* insurance *Application* to TD Life;

then your effective date of insurance coverage and proof of insurance will be as follows:

- **If you answered “NO” to all health questions in the section “Information about *your application and your health*”** and the amount of coverage requested is \$500,000 or less, *your* coverage is automatically approved and takes effect on the date *you* complete the *Application*. The completed insurance *Application* and *your* Certificate of Insurance will be *your* proof of insurance.
- **If you answered “YES” to any of the questions in the section “Information about *your application and your health*”** or if the amount of coverage requested is greater than \$500,000, *you* are required to complete a *Health Questionnaire* in order to be considered for coverage. If *your Application* is approved, coverage starts on the date we write to let *you* know we have approved. In this case, the documents that represent *your* proof of insurance are the letter of approval, the *Health Questionnaire*, *Application* and *your* Certificate of Insurance.

When *our* written approval is required, we will write to let *you* know of *our* decision within 30 days from the date we received all required information.

When you must complete a *Health Questionnaire*

The *Insured Person* will need to complete a *Health Questionnaire* if the *Insured Person* answered “YES” to any of the health questions in the *Application* (section: Information about *your application and your health*).

The *Insured Person* will need to complete a *Health Questionnaire* if the coverage requested for all *your* business credit product(s) is greater than \$500,000.

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

Business Credit Living Benefit Insurance includes Critical Illness and Disability coverage. Coverages are not offered separately.

Amount of Protection

Business Credit Living Benefit Insurance can provide coverage for your business loans, business line of credit, business overdraft protection, and TD Business Credit Card(s) with *TD Canada Trust*.

Insurance coverage is based on the amount of insurance applied for and the *Total Authorized Business Credit* amount. With full coverage, *Critical Illness* and *Disability* coverage automatically reduces as the *Total Authorized Business Credit* amount reduces.

If the *Total Authorized Business Credit* is later increased, a new *Application* is required to increase your coverage (See "Making a Change to Your Coverage").

Business Credit Living Benefit Insurance Coverage

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

- (i) the amount of insurance applied for in the *Application*;
- (ii) the insurance coverage from the previous day where your *Total Authorized Business Credit* has been increased but not the *Business Credit Living Benefit Insurance* coverage;
- (iii) the dollar value of the *Total Authorized Business Credit*; **or**
- (iv) \$1,000,000 with a maximum limit of \$500,000 towards *Revolving Credit Products*.

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).

Partial coverage can be offered under the following two scenarios:

- (i) If the total of 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**

- (ii) If your *Total Authorized Business Credit* exceeds \$1,000,000, you can apply for partial coverage in the amount you choose, up to the coverage maximum amount of \$1,000,000. For *Revolving Credit Products*, the maximum coverage is \$500,000.

For business credit with partial coverage, the amount of the *Critical Illness* and *Disability* coverage insurance benefit available will be limited to the amount specified at the time of *Application*, subject to the maximum coverage amount.

Critical Illness Coverage

Your Critical Illness coverage can pay up to \$1,000,000 for all your insured business credit products combined, with a limit of \$500,000 towards your Revolving Credit Products.

When paying a *Critical Illness* benefit, the Insurer will calculate the amount of benefits payable as of the date of diagnosis.

Disability Coverage

The maximum Disability benefit offered for your insured TD Canada Trust 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*.

For more information, refer to section “How a *Disability* Benefit is Determined and Paid” in the Certificate of Insurance.

If more than one *Insured Person* is *Totally Disabled* at the same time, we will pay *Disability* benefits up to a maximum of two *Insured Persons* simultaneously.

In the event the *Insured Person* becomes *Totally Disabled* and the claim has been approved, we can pay a benefit amount towards your insured business credit products after the *Elimination Period*, subject to any limitations set out in the Exclusions and Limitations section on page 14.

If we determine that the *Insured Person* is no longer *Totally Disabled*, we will stop paying benefits. Please refer to the section “When Your *Disability* Insurance Benefit Payments End” on page 42 for more details.

Coverage changes

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*. For more information, refer to section “Making a Change to *Your Coverage*” on page 44.

Coverage increase:

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*.

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

Coverage decrease:

As *your Total Authorized Business Credit* decreases *your* insurance coverage may also decrease.

You may also request a decrease in coverage at any time by completing the relevant section of the *Notification of Change Form*.

Beneficiary of the Insurance

When a claim is approved, the Insurer will pay *Critical Illness* and *Disability* benefits to *TD Bank* to pay towards the outstanding balance under *your* Total Insured Business Credit.

Premiums to Be Paid by the Business

Your cost for *Business Credit Living Benefit Insurance* is based on the *Insured Person's* age at billing, gender, smoking status and *your* average daily business credit outstanding balance, subject to coverage maximums. Average daily business credit outstanding balance is calculated by averaging the daily balances of *your* insured business credit during the billing period.

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

The applicable premium rates appear in the table on the following page. These rates do not include applicable provincial sales taxes.

Premium Rates

Monthly premiums rate per \$1,000 of the average daily business credit outstanding balance is detailed in the chart on the following page.

For Example: if the *Insured Person* is a male, non-smoker, aged 35 with an average daily business credit outstanding balance for the month equal to \$100,000. The premium would equal \$38.88 as calculated in the below table.

Living Benefit Premium Calculation Sample	
Step 1: Premium rate	\$0.36
Step 2: Average daily business credit outstanding balance	$\$0.36 \times \$100,000 = \$36,000$
Step 3: Average daily business credit outstanding balance divided by 1000	$\$36,000 \div 1,000 = \36.00
Step 4: Applicable provincial sales tax	N/A
Monthly premium of \$36.00, plus any applicable provincial sales tax.	

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. An existing *Insured Person* may apply for non-smoker rates at any time once they meet the eligibility requirement.

Note: If the rates are increased, the increase will apply to everyone covered. You will be notified in writing before changes to the rates are made.

Payment frequency

Business Credit Living Benefit Insurance premiums, plus any applicable provincial sales taxes are withdrawn on the 15th calendar day of the month or next business day from the account indicated on your *Application*.

Age at billing	Male		Female	
	Non-smoker (\$)	Smoker (\$)	Non-smoker (\$)	Smoker (\$)
26 and under	0.25	0.27	0.25	0.26
27	0.26	0.28	0.26	0.27
28	0.26	0.28	0.26	0.27
29	0.26	0.28	0.26	0.27
30	0.27	0.29	0.27	0.28
31	0.28	0.31	0.29	0.29
32	0.29	0.32	0.30	0.30
33	0.31	0.36	0.32	0.32
34	0.34	0.39	0.34	0.35
35	0.36	0.42	0.38	0.39
36	0.38	0.45	0.41	0.43
37	0.41	0.49	0.44	0.48
38	0.45	0.55	0.48	0.54
39	0.50	0.62	0.52	0.61
40	0.51	0.67	0.55	0.67
41	0.55	0.73	0.59	0.75
42	0.59	0.79	0.63	0.82
43	0.63	0.87	0.68	0.92
44	0.69	0.97	0.73	1.02
45	0.78	1.13	0.81	1.19
46	0.85	1.32	0.88	1.31
47	0.92	1.54	0.94	1.44
48	1.02	1.79	1.01	1.61
49	1.10	2.08	1.08	1.75
50	1.26	2.18	1.12	1.91
51	1.40	2.27	1.19	2.05
52	1.49	2.46	1.24	2.18
53	1.64	2.77	1.32	2.33
54	1.81	3.09	1.40	2.48
55	2.11	3.64	1.61	2.91
56	2.46	4.30	1.86	3.42
57	2.78	5.05	2.14	3.91
58	3.06	5.64	2.28	4.18
59	3.35	6.24	2.43	4.46
60	3.66	6.83	2.56	5.28
61	3.95	7.47	2.71	5.63
62	4.26	8.08	2.87	5.96
63	4.62	8.75	3.04	6.33
64	5.00	9.39	3.23	6.71
65	5.50	10.01	3.42	7.80
66	5.86	10.56	3.58	8.19
67	6.22	11.07	3.74	8.59
68	6.58	11.56	3.92	9.06
69	6.95	12.02	4.11	9.54

Exclusions and Limitations

Caution

An insurance benefit will not be paid and coverages will be terminated, if the *Insured Person* or the business:

- fails to answer the smoking status question in the *Application* accurately; **or**
- gives any false or incomplete responses to:
 - information that we require to approve your *Business Credit Living Benefit Insurance* coverage; **or**
 - information when requesting any change to your coverage.

Additionally:

- 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.

We will not pay a *Critical Illness* benefit if:

- the *Insured Person's* diagnosis of a covered condition occurs within 24 months of the start 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 start of your *Critical Illness* coverage (this is called a “**pre-existing condition**”). If you increase your coverage, pre-existing condition will apply during the 24 months prior to the effective date of the coverage increase;
- the claim is a result of the *Insured Person's* use of illegal or illicit drugs or substances;
- the claim is a result of the *Insured Person's* misuse of medication obtained with or without a prescription;
- the *Insured Person* fails to attend an independent medical examination arranged by the Insurer; **or**
- the *Critical Illness* claim is not made within one year of the date of diagnosis.

Exclusions and Limitations (continued)

We will not pay a *Disability* benefit if:

- your *Total Disability* occurs before the insurance coverage starts;
- 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 within 24 months prior to the start of your insurance (this is called a “**pre-existing condition**”). If you increase your coverage, pre-existing condition will apply during the 24 months prior to the effective date of the coverage increase;
- the *Insured Person's Total Disability* is the result of a normal pregnancy;
- 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;
- 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;
- the *Insured Person's Total Disability* is a result of the *Insured Person's* intentional self-inflicted injury;
- the *Insured Person* is not *Actively at Work* due to job loss, strike or layoff;
- the *Insured Person* is confined in a prison or a similar institution;
- the *Insured Person* becomes *Totally Disabled* as a result of elective cosmetic surgery or experimental surgery or treatment;
- 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 of the *Activities of Daily Living* (refer to the “Definitions of Terms We’ve Used” section within the Certificate for the definitions of *Activities of Daily Living*);

Exclusions and Limitations (continued)

- *your* 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* turns 65 years of age;
- more than two persons insured on the business credit are *Totally Disabled* at the same time; in this case, we will only pay benefits for the first two persons who became *Totally Disabled*;
- 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.

Cancellation and End of Insurance

To cancel your *Business Credit Living Benefit Insurance* simply call TD Life at **1-888-983-7070**. 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 cannot cancel coverage of another signing authority.

You will be able to cancel your coverage by phone anytime after the first 10 days following the date you completed your insurance *Application*, if we can confirm your identity. In that case, your cancellation will be effective upon completion of the call.

Otherwise, we will require a written request from you to confirm your cancellation. Cancellation will be effective on the date the request is received by us.

Send your written request for cancellation to the address of the administrator (TD Life) indicated at the back of this guide. You may also use the "Notice of Rescission of an Insurance Contract" included in this booklet.

If you cancel your coverage within **30 days** of the date of applying for insurance, we will refund any premiums paid provided no claims have been made. You may cancel your coverage at any time after the 30 days from the date of *Application*, and we will refund any unearned premiums.

End of the Insurance Coverage

Critical Illness coverage ends the date the *Insured Person* turns **70 years old**.

Disability coverage ends the date the *Insured Person* turns **65 years old**. *Disability* coverage will also end when we pay 48 months of *Disability* benefit payments to your insured business credit.

Once you are insured, *Critical Illness* and *Disability* coverage ends without notice to you on the date when one 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 request in writing or by telephone (if we are able to confirm your identity) to cancel coverage;
- Your insured business credit is closed, paid in full, refinanced, discharged or assumed by another person;*

- Your insured business credit has been transferred to another financial institution;*
- The date your insurance premiums are in arrears for a total of three months while insured under this Certificate;
- the greater of 30 days after you were provided with written notice of the termination of the *Policy*, or the date mentioned in the notice of termination;*
- We pay any *Critical Illness* insurance benefit to your insured business credit;
- TD Bank starts legal proceedings against you concerning your insured business credit.*

*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*

Proof of Diagnosis or Claim

Submission of a Claim

Claim forms are available by calling TD Life at **1-888-983-7070** or online at tdinsurance.com/claims.

The original claim form and proof of diagnosis of illness or disability must be received by TD Life as soon as possible after the event, **but no later than the time limitations as follows:**

For a *Critical Illness* claim, you must submit a written claim to us within one year of being diagnosed with a covered *Critical Illness*. You will also need to provide written proof, from a doctor licensed and 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 you become *Totally Disabled*.

Any claims that are submitted after these deadlines will not be paid.

Additional proof or information regarding the claim may also be required.

We may require that a doctor of our choice examines you to validate a *Critical Illness* and/or *Disability* claim. Payment of benefits is made only after these proof-of-claim requirements are satisfied.

All claims should be sent to:

TD Life Insurance Company
Box 1, TD Centre Toronto, Ontario M5K 1A2

We determine the amount of *your* benefit as described in the sections “How A *Critical Illness* Benefit Is Determined and Paid” on page 35 and “How A *Disability* Benefit is Determined and Paid” on page 38.

You are limited to one *Critical Illness* claim per *Insured Person*. If we pay any *Critical Illness* benefit on *your* insured business credit product(s), *Critical Illness* and *Disability* coverages will end for the *Insured Person*.

For *Critical Illness* claims, the benefit amount is determined by the date of diagnosis.

You are limited to 24 months of *Disability* benefit payments per disability for an *Insured Person*.

For an explanation regarding the calculation of the benefit amount, please refer to the section “How a *Critical Illness* Benefit is Determined and Paid” and “How a *Disability* Benefit is Determined and Paid” in the Certificate of Insurance.

The maximum *Critical Illness* benefit amount is **\$1,000,000**, with a maximum limit of \$500,000 for *Revolving Credit Products*. The maximum *Disability* coverage benefit amount is \$3,000 monthly up to 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*.

Insurer’s Reply

Once the required proof of diagnosis of a covered *Critical Illness* and/or *Disability* has been received and the claim has been approved, payment will be made by the Insurer within **30 days**.

Appeal of an Insurer’s Decision and Recourses

If *your* claim is refused, *you* can appeal this decision by submitting new information to the Insurer. *You* may also consult the Autorité des marchés financiers or *your* own legal advisor.

Definitions Of The Terms We've Used

The Distribution Guide used the following terms, which are identified in *italics*:

<p><i>Accident</i></p>	<p>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:</p> <ul style="list-style-type: none"> • whether the illness or condition arose before or after <i>your</i> coverage starts; • how <i>you</i> came to suffer from the illness or condition; or • whether the illness, condition or defect or resulting injury was expected or unexpected.
<p><i>Acute Heart Attack</i></p>	<p>the death of a portion of <i>your</i> heart muscle resulting from inadequate blood supply for which the following test results are confirmed:</p> <ul style="list-style-type: none"> • 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. <p>Diagnosis of the <i>Acute Heart Attack</i> must be made by a qualified cardiac specialist.</p> <p><i>Acute Heart Attack</i> does not include:</p> <ul style="list-style-type: none"> • 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.
<p><i>Activities of Daily Living</i></p>	<p>Activities of Daily Living – The basic activities are:</p> <ul style="list-style-type: none"> • 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
<p><i>Actively Working/ Actively at Work</i></p>	<p><i>Actively Working</i> or <i>Actively at Work</i> means carrying out the regular duties of the <i>Insured Person's</i> occupation, at least 20 hours a week, for wages or expectation of profit.</p>
<p><i>Application</i></p>	<p>the completed written, printed, electronic and/or telephone <i>Application</i> for <i>Business Credit Living Benefit Insurance</i>, including the <i>Health Questionnaire</i>, if applicable.</p>

Business Credit Living Benefit Insurance	<i>Critical Illness</i> and <i>Disability</i> coverage as described in this Certificate of Insurance and provided under the <i>Policy</i> .
Cancer (life-threatening)	A life-threatening tumour characterized by the uncontrollable growth and spread of malignant cells. <i>Cancer (life-threatening)</i> does not include: <ul style="list-style-type: none"> • 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 <i>your</i> coverage starts
Critical Illness	coverage for <i>Cancer (life-threatening)</i> , <i>Acute Heart Attack</i> or <i>Stroke</i> , as more fully described in the " <i>Critical Illness</i> coverage" section.
Disability	coverage if you become <i>Totally Disabled</i> as more fully described in the " <i>Disability</i> coverage" section
Elimination Period	The first 30 consecutive days that the <i>Insured Person</i> is unable to perform all or substantially all of the duties of the <i>Insured Person's</i> occupation before the <i>Insured Person</i> became <i>Totally Disabled</i> . You will not be paid a <i>Disability Benefit</i> 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 <i>Total Disability</i> lasts more than 30 complete and consecutive days, starting on the date the <i>Insured Person</i> became <i>Totally Disabled</i>
Health Questionnaire	the detailed questionnaire that must be completed if the <i>Insured Person</i> answers "Yes" to any of the health questions on the <i>Application</i> or if coverage requested for all <i>your</i> insured business credit combined is greater than \$500,000.
Insured Person(s)	the person(s) identified in the <i>Application</i> who is/are insured under this Certificate of Insurance.
Notification of Change Form	the form that is completed by you or <i>TD Bank</i> when requesting changes to a customer's existing insurance coverage.
Policy	group <i>Policy</i> #45073 between Sun Life and <i>TD Bank</i> , which is administered by TD Life and provides <i>your Business Credit Living Benefit Insurance</i> 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. <i>Stroke</i> does not include: <ul style="list-style-type: none"> • Transient Ischemic Attacks

TD Bank	The Toronto-Dominion Bank.
TD Canada Trust	<i>TD Bank</i> and those of its affiliates that provide business credit for your loans, lines of credit and overdraft protection.
Total Authorized Business Credit	<p>the sum of your business loans, lines of credit and overdraft protection with <i>TD Bank</i> as follows:</p> <ul style="list-style-type: none"> 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. <p>Business Credit products not included in the <i>Total Authorized Business Credit</i> and therefore not covered:</p> <ul style="list-style-type: none"> 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	<p><i>Totally Disabled/Total Disability: means that due to Accident or sickness:</i></p> <ul style="list-style-type: none"> during the first 30 consecutive days, the <i>Insured Person</i> is unable to perform all or substantially all of the duties of the <i>Insured Person's</i> occupation before the <i>Insured Person</i> became disabled. This is called the <i>Elimination Period</i>. You will not be paid a <i>Disability</i> benefit and no benefit will accrue during this period; for the first 12 months following the <i>Elimination Period</i>, the <i>Insured Person</i> is unable to perform all or substantially all of the duties of the <i>Insured Person's</i> occupation before the <i>Insured Person</i> became disabled. after the first 12 months of benefits, the <i>Insured Person</i> is completely unable to engage in any occupation for which the <i>Insured Person's</i> education, training or experience qualifies the <i>Insured Person</i>. If the <i>Insured person</i> is a spouse of the owner or guarantor of the insured business credit and does not have an occupation or work for the business, <i>Totally Disabled/Total Disability</i> means that due to <i>Accident</i> or sickness, the <i>Insured Person</i> requires active and continuous care of a physician and is unable to perform 2 out of the 6 <i>Activities of Daily Living</i>.
You and your	the Business who is/are insured under the <i>Policy</i> .
We, us and our	Sun Life or TD Life, as applicable.

Similar Products

Business Credit Living Benefit Insurance is specifically designed for TD Canada Trust Small Business Banking customers and TD Commercial Banking customers. However, other types of similar coverage may exist in the market.

For More Information

For more information about *Business Credit Living Benefit Insurance*:

- Refer to the *Business Credit Living Benefit Insurance Application* and the Certificate of Insurance.
- Contact your local TD Canada Trust branch or call TD Life Customer Service at 1 888-983-7070.

This Distribution Guide is meant to provide an overview of the features and benefits of the insurance described. It is not intended to replace any certificate of insurance issued where a complete description of coverage is provided.

Referral to the Autorité des marchés financiers

For more information about the Insurer's obligation and the distributor's obligation to *you*, the customer, *you* can contact the Autorité des marchés financiers at:

Autorité des marchés financiers

Place de la Cité, Tour Cominar

2640 Laurier blvd, 4th floor

Quebec, Quebec G1V 5C1

Toll free: 1 877 525-0337

Quebec City: (418) 525-0337

Montreal: (514) 395-0337

Internet: <http://www.lautorite.qc.ca>

Protection for your Business

Protect What's Important

Distribution 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

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Certificate of Insurance

Pages 26 to 52 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 37 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 43 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. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the *Quebec Civil Code*.

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*:

If you have the following debt:	Your Total Authorized Business Credit will equal:
<ul style="list-style-type: none">• The credit limit on your business line of credit is \$700,000 (included);• The outstanding balance on your business loan is \$100,000 (included); and• Letter of Credit for \$33,000 (not included)	<p>\$600,000</p> <ul style="list-style-type: none">• 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).

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 44). 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 (\$)	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
	5,000	6,000	7,000	8,000	9,000	10,000	15,000	25,000	35,000	50,000	65,000	75,000
Average business LOC Statement balance	$(\$5,000 + \$6,000 + \$7,000 + \$8,000 + \$9,000 + \$10,000 + \$15,000 + \$25,000 + \$35,000 + \$50,000 + \$65,000 + \$75,000) / 12 = \$25,833.33$											
Insurance benefit paid	$\$100,000 + \$25,833.33 = \$125,833.33$											

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.

Business LOC balance (\$)	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
	5,000	6,000	7,000	8,000	9,000	10,000	15,000	25,000	35,000	50,000	65,000	75,000
Average business LOC Statement balance	$(\$5,000 + \$6,000 + \$7,000 + \$8,000 + \$9,000 + \$10,000 + \$15,000 + \$25,000 + \$35,000 + \$50,000 + \$65,000 + \$75,000) / 12 = \$25,833.33$											
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 42)

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

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”.

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 recalculate 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.

Premium Information for *Business Credit Living Benefit Insurance*

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.

Age at billing	Male		Female	
	Non-smoker (\$)	Smoker (\$)	Non-smoker (\$)	Smoker (\$)
26 and under	0.25	0.27	0.25	0.26
27	0.26	0.28	0.26	0.27
28	0.26	0.28	0.26	0.27
29	0.26	0.28	0.26	0.27
30	0.27	0.29	0.27	0.28
31	0.28	0.31	0.29	0.29
32	0.29	0.32	0.30	0.30
33	0.31	0.36	0.32	0.32
34	0.34	0.39	0.34	0.35
35	0.36	0.42	0.38	0.39
36	0.38	0.45	0.41	0.43
37	0.41	0.49	0.44	0.48
38	0.45	0.55	0.48	0.54
39	0.50	0.62	0.52	0.61
40	0.51	0.67	0.55	0.67
41	0.55	0.73	0.59	0.75
42	0.59	0.79	0.63	0.82
43	0.63	0.87	0.68	0.92
44	0.69	0.97	0.73	1.02
45	0.78	1.13	0.81	1.19
46	0.85	1.32	0.88	1.31
47	0.92	1.54	0.94	1.44
48	1.02	1.79	1.01	1.61
49	1.10	2.08	1.08	1.75
50	1.26	2.18	1.12	1.91
51	1.40	2.27	1.19	2.05
52	1.49	2.46	1.24	2.18
53	1.64	2.77	1.32	2.33
54	1.81	3.09	1.40	2.48
55	2.11	3.64	1.61	2.91
56	2.46	4.30	1.86	3.42
57	2.78	5.05	2.14	3.91
58	3.06	5.64	2.28	4.18
59	3.35	6.24	2.43	4.46
60	3.66	6.83	2.56	5.28
61	3.95	7.47	2.71	5.63
62	4.26	8.08	2.87	5.96
63	4.62	8.75	3.04	6.33
64	5.00	9.39	3.23	6.71
65	5.50	10.01	3.42	7.80
66	5.86	10.56	3.58	8.19
67	6.22	11.07	3.74	8.59
68	6.58	11.56	3.92	9.06
69	6.95	12.02	4.11	9.54

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:

Living Benefit Premium Calculation Sample	
Step 1: Premium rate	\$0.36
Step 2: Average daily business credit outstanding balance	$\$0.36 \times \$100,000 = \$36,000$
Step 3: Average daily business credit outstanding balance divided by 1000	$\$0.36 \times \$100,000 \div 1000 = \$36$
Step 4: Applicable PST	$\$36 + (\$36 \times 8\%) = \$38.88$
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.

Living Benefit Premium Calculation Sample	
Step 1: Premium rate	\$0.36
Step 2: Average daily business credit outstanding balance	$\$0.36 \times \$50,000 = \$18,000$
Step 3: Average daily business credit outstanding balance divided by 1000	$\$18,000 \div 1,000 = \18.00
Step 4: Applicable PST	$\$18.00 + (\$18.00 \times 8\%) = \$19.44$
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*:

<p><i>Accident</i></p>	<p>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:</p> <ul style="list-style-type: none"> • whether the illness or condition arose before or after <i>your</i> coverage starts; • how <i>you</i> came to suffer from the illness or condition; or • whether the illness, condition or defect or resulting injury was expected or unexpected.
<p><i>Acute Heart Attack</i></p>	<p>the death of a portion of <i>your</i> heart muscle resulting from inadequate blood supply for which the following test results are confirmed:</p> <ul style="list-style-type: none"> • 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. <p>Diagnosis of the <i>Acute Heart Attack</i> must be made by a qualified cardiac specialist.</p> <p><i>Acute Heart Attack</i> does not include:</p> <ul style="list-style-type: none"> • 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.
<p><i>Activities of Daily Living</i></p>	<p>Activities of Daily Living – The basic activities are:</p> <ul style="list-style-type: none"> • 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
<p><i>Actively Working/ Actively at Work</i></p>	<p><i>Actively Working</i> or <i>Actively at Work</i> means carrying out the regular duties of the <i>Insured Person's</i> occupation, at least 20 hours a week, for wages or expectation of profit.</p>
<p><i>Application</i></p>	<p>the completed written, printed, electronic and/or telephone <i>Application</i> for <i>Business Credit Living Benefit Insurance</i>, including the <i>Health Questionnaire</i>, if applicable.</p>

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: <ul style="list-style-type: none"> • 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 <i>Totally Disabled</i> as more fully described in the "Disability coverage" section
Elimination Period	The first 30 consecutive days that the <i>Insured Person</i> is unable to perform all or substantially all of the duties of the <i>Insured Person's</i> occupation before the <i>Insured Person</i> became <i>Totally Disabled</i> . You will not be paid a <i>Disability Benefit</i> 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 <i>Total Disability</i> lasts more than 30 complete and consecutive days, starting on the date the <i>Insured Person</i> became <i>Totally Disabled</i>
Health Questionnaire	the detailed questionnaire that must be completed if the <i>Insured Person</i> answers "Yes" to any of the health questions on the <i>Application</i> 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 <i>Application</i> who is/are insured under this Certificate of Insurance.
Notification of Change Form	the form that is completed by you or <i>TD Bank</i> when requesting changes to a customer's existing insurance coverage.
Policy	group Policy #45073 between Sun Life and <i>TD Bank</i> , which is administered by TD Life and provides your <i>Business Credit Living Benefit Insurance</i> 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: <ul style="list-style-type: none"> • Transient Ischemic Attacks

TD Bank	The Toronto-Dominion Bank.
TD Canada Trust	<i>TD Bank</i> and those of its affiliates that provide business credit for your loans, lines of credit and overdraft protection.
Total Authorized Business Credit	<p>the sum of your business loans, lines of credit and overdraft protection with <i>TD Bank</i> as follows:</p> <ul style="list-style-type: none"> 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. <p>Business Credit products not included in the <i>Total Authorized Business Credit</i> and therefore not covered:</p> <ul style="list-style-type: none"> 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	<p><i>Totally Disabled/Total Disability: means that due to Accident or sickness:</i></p> <ul style="list-style-type: none"> during the first 30 consecutive days, the <i>Insured Person</i> is unable to perform all or substantially all of the duties of the <i>Insured Person's</i> occupation before the <i>Insured Person</i> became disabled. This is called the <i>Elimination Period</i>. You will not be paid a <i>Disability</i> benefit and no benefit will accrue during this period. for the first 12 months following the <i>Elimination Period</i>, the <i>Insured Person</i> is unable to perform all or substantially all of the duties of the <i>Insured Person's</i> occupation before the <i>Insured Person</i> became disabled. after the first 12 months of benefits, the <i>Insured Person</i> is completely unable to engage in any occupation for which the <i>Insured Person's</i> education, training or experience qualifies the <i>Insured Person</i>. If the <i>Insured person</i> is a spouse of the owner or guarantor of the insured business credit and does not have an occupation or work for the business, <i>Totally Disabled/Total Disability</i> means that due to <i>Accident</i> or sickness, the <i>Insured Person</i> requires active and continuous care of a physician and is unable to perform 2 out of the 6 <i>Activities of Daily Living</i>.
You and your	the Business who is/are insured under the <i>Policy</i> .
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



Notice given by TD Canada Trust

Section 440 of the *Act respecting the distribution of financial products and services* (chapter D-9.2)

The Act respecting the distribution of financial products and services gives you important rights.

- The Act allows you to rescind an insurance contract you have just signed when signing another contract, **without penalty, within 10 days of its signature. However TD Life allows you to rescind the insurance contract you have just signed, without penalty, within 30 days of its signature provided no claim has been made.** To do so, you must give TD Life notice by registered mail without delay. You may use the attached model for this purpose.
- Despite the rescission of the insurance contract, the first contract entered into will remain in force. Caution, it is possible that you may lose advantageous conditions as a result of this insurance contract; contact your TD Canada Trust branch or consult your contract.
- After the expiry of the 30-day delay, you may rescind the insurance at any time; however, penalties may apply.

For further information, contact the Autorité des marchés financiers at (418) 525-0337 or 1-877-525-0337 or TD Life at 1-888-983-7070. TD Life acts as administrator for Sun Life Assurance Company in regard to this creditor insurance available through TD Canada Trust.

Notice of Rescission of an Insurance Contract

To: TD Life Insurance Company
PO Box 1, TD Centre
Toronto, Ontario M5K 1A2

Date: _____
(Date of sending notice)

Pursuant to section 441 of the *Act respecting the distribution of financial products and services*, I hereby rescind Business Credit Living Benefit Insurance contract no. _____

Entered into on:	_____	In:	_____
	(Date of signature of contract)		(Place of signature of contract)
	_____		_____
	(Name of customer)		(Signature of customer)
	_____		_____
	(Name of customer)		(Signature of customer)

A representative of TD Canada Trust must first complete this section.

“TD Canada Trust” means The Toronto-Dominion Bank and its subsidiaries.

This document must be sent by registered mail.

Sections 439, 440, 441, 442 and 443 of the Act must be reproduced on the back of this notice.

The Act respecting the distribution of financial products and services

Section 439

A distributor may not subordinate the making of a contract to the making of an insurance contract with the insurer specified by the distributor. The distributor may not exercise undue pressure on the client or use fraudulent tactics to induce the client to purchase a financial product or service.

Section 440

A distributor that, at the time a contract is made, causes the client to make an insurance contract must give the client a notice, drafted in the manner prescribed by regulation of the Authority, stating that the client may rescind the insurance contract within 10 days of signing it.

Section 441

A client may rescind an insurance contract made at the same time as another contract, within 10 days of signing it, by sending notice by registered mail.

Where such an insurance contract is rescinded, the first contract retains all its effects.

Section 442

No contract may contain provisions allowing its amendment in the event of the rescission or cancellation by the client of an insurance contract made at the same time.

However, a contract may provide that the rescission or cancellation of the insurance contract will entail, for the remainder of the term, the loss of the favourable conditions extended because more than one contract was made at the same time.

Section 443

A distributor that offers financing for the purchase of goods or services and that requires the debtor to subscribe for insurance to guarantee the reimbursement of the loan must give the debtor a notice, drawn up in the manner prescribed by regulation of the Authority, stating that the debtor may subscribe for insurance with the insurer and representative of the debtor's choice provided that the insurance is considered satisfactory by the creditor, who may not refuse it without reasonable grounds. The distributor may not subordinate the making of the contract of credit to the making of an insurance contract with the insurer specified by the distributor.

No contract of credit may stipulate that it is made subject to the condition that the insurance contract subscribed with such an insurer remain in force until the expiry of the term, or subject to the condition that the expiry of such an insurance contract will entail forfeiture of term or the reduction of the debtor's rights.

The rights of the debtor under the contract of credit shall not be forfeited when the debtor rescinds cancels or withdraws from the insurance contract, provided that the debtor has subscribed for insurance with another insurer that is considered satisfactory by the creditor, who may not refuse it without reasonable grounds.