KNOW YOUR CLIENT FORM

NEW UPDATE

Client Information

Last Name	First Name				Initial				
Home Address	Suite No.	PROV	City	1		Postal Code			
Mailing Address (If different from above)	Suite No.	PROV	City			Postal Code			
Business Phone Number	Cellular Phone N	lumber	Citizenship						
Date of Birth (mm/dd/yyyy)	Social Insurance	Number			Email				
Where do you reside for tax purposes: (check the box that applies) Canada USA OTHER									
Employment Information Self Employed?			MARITAL STATUS	Family SINGLE	Inform Marrie		WIDOW		
Employer Name			Spouse First name	Spouse	Last Name				
Occupation			Date of Birth						
2yr annual income average			Occupation						
Employer Address			2yr annual income av	verage					
NET WORTH INFORMATION Financial assets – Not required if purchasing under Friend, Family or close business associate exemption)									
Total combined amount of stocks/non-registered investments/cash	under Frien		Olly Or Close bi	usiness a	ssociat	e exemption) <u> </u>		
Total combined amount of registered investments/TFSA's etc		Spouse (if applicable)							
Total combined amount of property value net of mortgages owed		Spouse	Spouse (if applicable)						
IDENTIFICATION									
Identification type?									
Identification number									

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QUESTIONNAIRE							
Investment Objective							
Safety	Income	Balanced	Growth				
Subscriber understands t	hat this investment cannot be liquidated i	nstantly Se	oo itoms 2 5 9 10 in				
Subscriber understands that this investment cannot be liquidated instantly. See items 2,5,9,10 in Harvest MIC Offering Memorandum.							
Yes	•						
Third party determination							
Is a third party instructing you in how to handle your investment in Harvest MIC?							
Yes							
If yes, provide their name, and relationship to you. Also detail the circumstances of their instructions							
• • •							
Intended amount of Investment in Harvest MIC?							
Source of funds for the investment?							
l,	, understand that this is	a risky inve	stment and I have been				
not guaranteed its safety nor a rate of return. See items 8 in Harvest MIC Offering Memorandum.							
TYPING YOUR NAME IS CONSIDERED "SIGNING"							
Sign Here:							
PRIVACY DISCLOSURE STA	ATEMENT						
By signing this form, I consent to my personal information being collected, held, used and disclosed by							
Harvest Mortgage Investment Corporation ("Harvest MIC") to any regulatory body. Also, I consent to							
my personal information being utilized by Harvest MIC to determine my qualifications as an investor in							
their company.							
PLEASE SIGN BELOW							
I certify that the information provided in this application is true, accurate and complete, and Harvest							
may rely thereon until the undersigned sends written notice of any significant changes. I have read,							
understood and agree to all terms and conditions of the Harvest MIC offering memorandum.							
		Date					
Sign Here:		Date:					
TYPING YOUR NAME IS CONSIDERED "SIGNING"							