

Application deadline date: December 31, 2017							
To qualify for the \$400 annual benefit applicants must have been a resident of New Brunswick on December 31, 2016 and a recipient of a benefit under the <i>Old Age Security Act (Canada)</i> , notably:							
<ul> <li>The Federal Guaranteed Income Supplement (GIS) during 2016 (must be 65 years or older) or</li> <li>the Federal Allowance for the Survivor during 2016 (must be between 60-64 years old) or</li> <li>the Federal Allowance during 2016 (must be between 60-64 years old).</li> </ul>							
Important: Persons in receipt of a Federal allowance who are under the age of 60 do not qualify for this benefit.							
IF YOU QUALIFY, PLEASE COMPLETE ALL OF THE FOLLOWING:							
Ple	ase Print: Mr. Mrs. Ms. Date of birth YMD						
1.	Name of Applicant       Last       First       Middle						
2. Mailing Address							
3.	Postal Code   4. Telephone						
5.	Social Insurance Number       Image: Contact purposes:         Image: Contact purposes:       Image: Contact purposes:         Image: Contact purposes:       Image: Contact purposes:         Image: Contact purposes:       Image: Contact purposes:						
6.	6. Please indicate the federal benefits that you received in 2016:         Guaranteed Income Supplement (GIS) (must be 65 years or older)       Yes         Allowance for the Survivor (must be between 60-64 years old)       Yes         Allowance (must be between 60-64 years old)       Yes						
7.	Were you a resident of New Brunswick on December 31, 2016?						
8.	Do you reside with your spouse?						
9. Spouse's name							
10. Spouse's Social Insurance Number							
I declare the above information to be correct and I authorize Human Resources and Social Development Canada to verify this information. I recognize that an application must be submitted by December 31, 2017.							
Signature of Applicant							
Date Telephone							
If the applicant is unable to sign/complete this form, the applicant's representative must complete the following section:							
Signature of Applicant's Representative							
Date Telephone							
WHERE BOTH SPOUSES RECEIVED THE GUARANTEED INCOME SUPPLEMENT AND LIVED IN THE SAME HOUSEHOLD, ONLY ONE PAYMENT IS AVAILABLE.							
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The personal information on this form is being collected under the authority of the New Brunswick Income Tax Act, and will be used for the purposes of determining eligibility under the Low-Income Seniors' Benefit, and for necessary administration of this Program. If you have any questions regarding the collection and use of this information, please contact the Manager Tax Accounting, Department of Finance, P. O. Box 1900, Fredericton, NB E3B 5G4. Phone: 1-800-669-7070 or e-mail <a href="http://wwwfin@gnb.ca">wwwfin@gnb.ca</a>.

## FOR FURTHER INFORMATION PLEASE CALL 1-800-669-7070

For Office Use Only:		