



CORPORATE INVESTOR INFORMATION FORM

COMPANY NAME _____

BUSINESS NUMBER _____

MAILING ADDRESS _____

OFFICE ADDRESS _____

AUTHORIZED SIGNATORY NAME _____

TITLE OF SIGNATORY _____

DATE OF BIRTH _____

IS THE SIGNATORY A RESIDENT OF BC? YES NO

IF NO, PLEASE LIST THE COUNTRY OF RESIDENCE _____

HOME PHONE NUMBER _____

WORK PHONE NUMBER _____

EMAIL ADDRESS _____

AMOUNT YOU WOULD LIKE TO INVEST:

\$ _____

PLEASE PROVIDE A COPY OF DRIVER'S LICENCE AND A VOID CHEQUE.

I ELECT TO RECEIVE QUARTERLY DIVIDENDS AS FOLLOWS:

REINVEST AS ADDITIONAL PREFERRED SHARE RECEIVE DIVIDEND AS CASH

Please indicate if you would like to be added to our mailing list YES NO

By selecting Yes, you consent to *Metropointe Mortgage Investment Corporation*. ("MET MIC") and Metropointe Capital Inc. ("MET Capital") contacting you electronically regarding their events, announcements. You may unsubscribe from receiving these e-mails at any time, including by clicking on the "unsubscribe" link at the bottom of e-mails received from us. Please refer to the MET MIC Privacy Policy or contact us if you have any questions.

Our Privacy Policy also explains how MET MIC and MET Capital manage the personal information that you provide to us on this form. The Privacy Policy is available on our website (<https://metmic.com>), or from our Privacy Officer, whom you can contact at info@metmic.com.

By signing below, I certify all information is true and correct to the best of my knowledge.

Signature