



## Instructions for completing Client Contact and Website Access Request

### Important Information about this Form

#### Use this form to:

- ADD or remove someone from your plan's list of approved contacts.
- CHANGE someone's existing contact information, role, privileges, designations within your plan.
- ACTIVATE website access for an existing contact.

#### Important Information:

- Use a separate form for each contact.
  - By providing John Hancock with the information requested in this form, you can designate the individual who is responsible for administering your plan's contract. Depending on their role, the contact you designate on the form will have access to contract level and participant account level information, including information on:
    - Contract details
    - Investment options and allocation
    - Employee census
    - Account balance
    - Information on financial transactions
    - Contact information
    - Daily unit value and interest rate
    - Account administration
    - Access to Notice Manager except as noted
- This access may be through our website, or other acceptable and secure means (both electronic and through our call center).*
- Brokers and Registered Investment Advisors (RIAs) have access to your plan and participant's information through the Financial Representative website. To add these contacts to the Plan Sponsor website, please contact your Client Account Representative.

**John Hancock will process the requested changes as soon as administratively practicable following receipt of the complete form, provided that it is in good order.**

### General Terms and Conditions

1. The same individual cannot occupy more than one of the following client contact roles at the same time - Trustee, Authorized Signer, Administrative Contact, Payroll Administrator, and Intermediary Contact. Refer to Client Contact Designations section for additional designations that may be assigned to these contact roles.
2. There must always be a designated Trustee and/or Responsible Plan Fiduciary on record. If your requested changes result in the removal of all individuals in this role, we will be unable to complete your request.
3. All the client contact roles, except Payroll Administrator, have the ability to receive and download information from the website that includes a full display of Plan Participants' Social Security Number (SSN). The Payroll Administrator has access to the electronic submission page on the website including a full display of the Plan Participant's name and SSN. It is your responsibility to require the designated Client Contact to safe-guard and protect all the information made available in accordance with the standards required by law. John Hancock is not responsible for any breach of such responsibilities by the Client Contact designated by you.
4. If we have the email address and SSN of the individual designated on the form, they will receive an email containing a unique temporary registration Personal Identification Number (PIN) and instructions on how to register on the Plan Sponsor website. Once registered, the individual is required to maintain his/her own userid and the password used for accessing the Plan Sponsor website in his or her own safekeeping.
5. The use of the userid and password by the individual or any other users, whether authorized or unauthorized, will be sufficient authorization for John Hancock to act on information and instructions provided by him/her or to process transactions requested by him/her.
6. The website user will have the ability to update his/her email preferences, email address and/or name on the Plan Sponsor website.
7. An email address and SSN are required for website access to be enabled. First and last name must not contain numbers and special characters except apostrophe, dash and period. For intermediary roles, a 9-digit EIN may be provided in lieu of the SSN. If not provided, the contact will be added to the contract but will not have website access privileges. However, we reserve the right to later request this information to comply with the Customer Identification requirements under the U.S.A. Patriot Act.
8. The website user will have the ability to submit John Hancock' forms and other documents electronically on the Plan Sponsor website.

## Client Contact Roles and Privileges

### Trustee

- Must be assigned to the Plan's Trustee(s) and/or Responsible Plan Fiduciary(ies).
- Authorized to approve any type of financial transaction allowed under the contract.
- Authorized to provide direction on any administrative matter.
- Authorized to provide direction with respect to the ACH bank account(s) provided to John Hancock.
- Has access to view and download plan, employee, and participant information on the Plan Sponsor website that includes a full display of SSN.
- Can manage the profiles of all client contact roles.
- Can set website permissions for the plan's TPA firm.

### Authorized Signer

- Authorized to approve participant level financial transactions allowed under the contract (such as loan requests, if applicable, withdrawals or investment changes).
- Authorized to provide administrative directions and update employees' census information.
- Has access to view and download plan, employee, and participant information on the Plan Sponsor website that includes a full display of SSN.
- Can manage the profiles of all Administrative Contacts and Payroll Administrators.
- Can set website permissions for the plan's TPA firm.

### Important information if one of the plan's Trustee or Authorized Signer contacts is affiliated with a Third Party Firm ("Institutional Trustee"):

- The representative(s) designated to act on behalf of the Institutional Trustee will be assigned to either a Trustee Role or Authorized Signer Role, as specified.
- The authority of the Institutional Trustee is derived from its agreement with the Plan Trustee/Responsible Plan Fiduciary. It is the responsibility of the parties to the agreement, and not John Hancock, to monitor and ensure that each representative of the Institutional Trustee acts within the authority granted by such agreement.
- Institutional Trustee representative(s) assigned to the Trustee role will be set up with the authority and privileges associated with that role.
- Institutional Trustee representative(s) assigned to the role of Authorized Signer will be set up with the authority and privileges associated with that role.

### Responsible Plan Fiduciary

- Plans with a Non-Discretionary (Passive or Directed) Trustee only must also designate a person to serve as the Plan's Responsible Plan Fiduciary.
- A Responsible Plan Fiduciary will be set up with the authority and privileges associated with the Trustee Role.

### Administrative Contact

- Authorized to provide administrative directions and update employees' census information.
- Cannot authorize participant level financial transactions (such as loan requests (if applicable), withdrawals or investment changes).
- Has access to view and download plan, employee, and participant information on the Plan Sponsor website that includes a full display of SSN.
- Can manage the profiles of all Administrative Contacts and Payroll Administrators.

### Payroll Administrator

- Authorized to ONLY submit contributions and employees' census information.
- Has access to our Plan Sponsor website that is limited to the electronic submission pages, including name and Social Security Number of all participants on the website.
- Has access to the contract's cash account to fund contribution submissions.
- Does not have access to Notice Manager and SEND Service.

### Intermediary Contact - Auditor

- Auditors can be granted the Intermediary Contact role, with the following privileges:
  - Access to view and/or download information from the website, submit and update contributions and employees' census information, and view salary information that includes a partial display of SSN (last four digits of SSN). If permission is granted, then the individual may have access to a full display of SSN.
  - Cannot authorize participant level financial transactions (such as loan requests (if applicable), withdrawals or investment changes).
  - Cannot authorize administrative directions.
  - May be provided with access to Notice Manager and SEND Service (if selected).

## Client Contact Designations

1. The following designations must be assigned to an individual(s) within your plan.
2. The same individual may be assigned to multiple designations.
3. Any change to each of the client contact designations will replace the existing one on our records.
4. If you are requesting the removal of a client contact with one of these designations, or one of these designations cannot be assigned to the client contact role selected, the client designation will automatically default to the first Trustee of record listed on the Plan Sponsor website.
5. If one of these designations cannot be assigned to the client contact role selected, the client designation will remain with the current recipient client contact on the Plan Sponsor website.

### Trustee Mail Recipient

- Recipient for all correspondence mailed to the Trustee mailing address.
- Must be a Trustee Contact as described.
- Must be assigned to only one Trustee Contact.

### Client Mail Recipient

- Recipient for all Plan Sponsor correspondence sent to you by John Hancock.
- Must be assigned to only one of the following client contact roles - Trustee, Authorized Signer or Administrative Contact.

### Primary Contact

- The primary client contact for all administrative matters.
- Depending on the contact preferences of the contract, John Hancock will either work directly with your Primary Contact or your preferred intermediary contact.
- Must be assigned to only one of the following client contact roles - Trustee, Authorized Signer or Administrative Contact.

### Investment Comparative Chart (ICC) Designate

- The contact for employee enquiries in the ERISA 404a-5 support materials available from us for your use.
- Must be assigned to only one of the following client contact roles - Trustee, Authorized Signer or Administrative Contact.

### Participant Statement Consultant (Optional)

- Individual designated to have name and telephone number referenced on Participant Statements and Plan Highlights.
- Can be assigned to only one of the following client contact roles - Trustee, Authorized Signer, Administrative Contact or Payroll Administrator.

### SEND Service Notice Contact

- If SEND Service is selected, the individual designated to have their name and email referenced on the notices generated by SEND Service (e.g., Safe Harbor).
- Can be assigned to only one of the following client contact roles - Trustee, Authorized Signer or Administrative Contact.



# Client Contact and Website Access Request

## Important Information about this Form

### Use this form to:

- ADD or REMOVE someone from your plan's list of approved contacts.
- CHANGE someone's existing contact information, role, privileges, designations within your plan.
- ACTIVATE website access for an existing contact.

Use a separate form for each contact.

### Important Information:

- Review the attached **Instructions for Completing the Client Contact and Website Access form** for role definitions, privileges and designations prior to completing this form.
- All pages of this form must be submitted together.
- Do not return the Instruction pages to John Hancock. Return only this form to John Hancock for processing.
- The form must be submitted within 3 months of being signed.

All changes must be initialed in pen (including numbers crossed out or changed using correction fluid).

Completed documents can be submitted on the website using the Submit a Document tool. For further assistance, contact your Client Account Representative.

## 1. General Information

The Trustee of  
Contractholder Name

Plan ("the Plan")

Contract Number

## 2. What would you like to do?

### Add a new contact (Complete Section 3)

If this individual has access to our Plan Sponsor website through another contract, please provide the contract number to enable us to add access to your contract through their existing profile.

Contract Number

### Change an existing contact (select all that apply)

Existing Contact's Name (first, last)

- Change of Name or Contact Details (Complete 3A)
- Contact's Role (Complete 3B)
- Signature Specimen (Complete 3C)
- Client Designations (Complete 3D)
- Direct Debit Permission (Complete 3E)

### Delete a contact - We will remove the names you provide below from John Hancock record keeping system.

**Note: Your contract must always have a Trustee contact on our recordkeeping system. If the plan uses an Institutional Trustee to provide non-discretionary trustee services, the plan must also have a Responsible Plan Fiduciary on record. Each plan must also have at least one designee for each of the Client Designations in Section 3D. When removing contacts, ensure that a suitable replacement, if required, is provided in Section 3.**

Contact Name

Contact Name

### 3. Add/Change Contact

An email address and SSN are required for website access to be enabled. First and last name must not contain numbers and special characters except apostrophe, dash and period. For intermediary roles, a 9-digit EIN may be provided in lieu of the SSN. If not provided, the contact will be added to the contract but will not have website access privileges. However, we reserve the right to request this information to comply with the Customer Identification requirements under the U.S.A. Patriot Act.

**For Authorized Signers and Trustee roles, all information is required including the contact's email address.**

#### A – Contact Details

\_\_\_\_\_  
Name (First Name, Last Name)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Institutional Trustee (Firm Name) *Mandatory if the Contact is not an employee of the Plan Sponsor*

*(For plans with a non-discretionary (passive or directed) trustees, a Responsible Plan Fiduciary must also be designated. To add a Responsible Plan Fiduciary, complete a separate Client Contact and Website Access Request Form.)*

\_\_\_\_\_  
Telephone Number\*

\_\_\_\_\_  
Extension

\_\_\_\_\_  
Fax Number\*

\*Telephone Numbers should only be completed for new users. Existing contacts must update this information online via the **"Edit My Profile"** feature.

\_\_\_\_\_  
Contact's Business Email Address - Must be a company's email address, unique to the individual.

#### B – Contact's Role

If multiple roles are selected, the client contact role with greater authority/access will be granted, where applicable.

(Select ONE only)

- Trustee
- Responsible Plan Fiduciary – Required for Non-Discretionary (Passive or Directed) Trustee Plans only  
(A Responsible Plan Fiduciary will be assigned to the Trustee role on our recordkeeping system, and will have the same authority and privileges as a contact in the Trustee role).
- Authorized Signer
- Administrative Contact
- Payroll Administrator
- Intermediary Contact - Auditor

#### C – Signature Specimen

**Required for Trustee, Responsible Plan Fiduciary, and Authorized Signer only**

The specimen signature provided will be used to validate your authorization of any forms provided to John Hancock in the future. Please provide your signature as you would typically sign such forms to avoid delays in processing.



#### D – Contact's Designations

- Primary Contact
- Investment Comparative Chart (ICC) Designate
- Client Mail Recipient
- Participant Statement Consultant (Telephone number must be provided above)
- Trustee Mail Recipient
- SEND Service Notice Contact

**E – Direct Debit Permission**

Indicate bank names and account numbers already on record with John Hancock to which this contact should have authorization to direct Automated Clearing House (ACH) transactions. Alternately, you may remove their authority to direct ACH transactions from specified bank accounts or all accounts. This direction does not override/change any existing authorization already on record other than the changes specified. If you wish to add additional bank account(s), complete the Banking Authorization for Automated Clearing House (ACH) Transactions form.

1. Bank Name	Bank Account Number	Add <input type="checkbox"/>	Remove <input type="checkbox"/>
2. Bank Name	Bank Account Number	<input type="checkbox"/>	<input type="checkbox"/>

If you require additional space to list additional ACH accounts or you would prefer to send a paper listing containing the ACH account information, please check the applicable box below. You must ensure a Trustee/Responsible Plan Fiduciary has signed your attached listing. The attached listing must include the Bank Name, Bank Account Number, ADD or REMOVE.

See attached paper listing - must also be signed by a Trustee/Responsible Plan Fiduciary.

**Or to delete access privileges to all existing ACH accounts, check the following box.**

**4. Authorization and Signature**

I authorize John Hancock to grant access to the Plan Sponsor website to the Contact that I designate above and with respect to whom I have provided to John Hancock their email address and Social Security Number. I acknowledge that if my contract has been set up with Automated Clearing House (ACH) payment feature, the Contact listed with respect to whom Access to ACH Bank Account has been granted will be authorized to use this feature. I have reviewed the instruction page of this form and agree to the privileges associated with each role and granted to the Contact that I designate above.

I, for myself and on behalf of each Contact designated above, agree to maintain our userid and password used for accessing the Plan Sponsor website in our own safekeeping, and further agree that the use of such userid and password by the designated Contact or any other users, whether authorized or unauthorized, will be sufficient authorization for John Hancock to act on information and instructions provided by them or to process transactions requested by them. John Hancock is not responsible for any loss or damages to the Plan, the Trustees(s), the Plan Sponsor, participants or beneficiaries for relying and acting on such information, instructions or requests.

On behalf of the Plan Sponsor and the Trustee of the Plan, I hereby agree and acknowledge that:

- (a) John Hancock will not be responsible or liable for following the instructions on this Form;
- (b) John Hancock shall not be responsible for any action or omission of the Contact with respect to this authorization, including any unauthorized access to, or use, of Plan or participant information by each designated Contact; and
- (c) It is my responsibility to require each Contact designated above to safeguard and protect the information made available to it pursuant to this authorization in accordance with the standards required by law.

On behalf of the Plan Sponsor and Trustee, I further agree to indemnify and hold John Hancock, its affiliates, and each of its employees, officers, directors, and agents, harmless from and against, any and all claims, suits, losses, damages, costs, charges, counsel fees, payments, expenses, and liability arising out of, or attributable to, the authorization granted herein or for any breach of responsibilities by a designated Contact described in clause (c) above.

John Hancock will not be responsible to the Plan, the Trustee(s), the Plan Sponsor, participants or beneficiaries for any expense or investment loss resulting from the use of the website access by any such Contacts or users, whether authorized or unauthorized, or from incorrect or erroneous information transmitted by them. I understand that I may change or terminate the appointment or assigned role of a Contact at any time by giving prior written notice and other required information to John Hancock.

Existing Trustees, Authorized Signers and Administrative Contacts can manage the specific profiles designated above in accordance with the privileges assigned to the individual's role described on the instruction page of this form.

**An existing Trustee/Responsible Plan Fiduciary must sign this form if additions, changes or deletions to the role of a contact are for a Trustee, Authorized Signer, or Intermediary Contact and/or if the designated Contact is to be provided with authorization to provide instructions with respect to the ACH Bank Account(s) listed on this form (and, if applicable, the attachment) or a Participant Statement Consultant designation.**

Signature of Trustee/Responsible Plan Fiduciary/ Authorized Signer	Name - please print	Date
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