

Request for redemption of units form Mackenzie Northleaf Private Infrastructure Fund (the "Fund")

Mackenzie Nortinear F	iivate iiiiia	istiuctuie i	una (the Tu	id)			
Type of Unitholder							
Please identify what type of Unith	older you are by	checking the ap	oplicable box below:				
Either an Individual, Joint Acc Managed Accounts. (If selected)	•		-Managed Account. (l	If selected, fill out S	ection 1)		
Section 1 Please complete the below if you Corporation, or other Non-Manage		signed unithold	er of the Fund (the	"Unitholder") that i	is an Indivi	dual, Joint Account	
a) Redemption Information							
The Unitholder, having received t and having read and understood (the "Units") of the Fund as is indi	the terms of red					_	
Name of Unitholder(s)	Dealer Account No.	Mackenzie Account No.	Fund No.	No. of Units to Redeem or Dollar Amount to Redeem			
Name of Unitholder			9274 (Series A) or 9275 (Series F)	all units or	units	\$	
Name of Joint Unitholder (if applicable)							
on the next available redemption received at least 120 days (but no Series A and Series F Units that are in the Offering Memorandum. No circumstances described in the Offering Memorandum, accounts, unless the accounts, please attach a void chapter by Signatures	ot more than 180 e redeemed with Notices of reder Offering Memore e Manager agree	O days) prior to only the days) prior to only in three years or mptions may number and um or, in exes otherwise, re	a Redemption Date.T f their issue date will ot be subsequently traordinary circums edemption proceeds	the Unitholder ackr be subject to an ear withdrawn by the tances, with the M will be paid to the o	nowledges a ly redempti e Unithold anager's co	and agrees that any ion fee as described er except in those onsent.	
Signature of Unitholder (required)			Date (MM/DD/Y	Date (MM/DD/YYYY)			
Joint Unitholder signature (if applicable)			Date (MM/DD/Y	YYY)			
Advisor signature (required)			Date (MM/DD/Y	YYY)			

Advisor name (required) Page 1 of 3

Section 2 Managed Accounts

Please complete the below if you are a registered Dealer or Advisor that is requesting the redemption of Units of the Fund on behalf of one or more fully managed accounts. <u>If more space is needed in the below table</u>, a <u>separate spreadsheet may be sent to the Manager</u>.

a) Redemption Informati

Name and Address of Registrant Firm Reque	sting the Redemption of Units on behalf of Managed Accounts:	
Print full legal name	Telephone number	
Address	E-mail address	
City, Province, Postal Code		

The registered Dealer or Advisor (acting on behalf of one or more fully managed accounts), having received the offering memorandum of the Fund as amended from time to time (the "Offering Memorandum"), and having read and understood the terms of redemption therein, hereby requests the redemption of all or that portion of the managed accounts' Units of the Fund as is indicated below:

Name of Unitholder(s)	Dealer Account No.	Mackenzie Account No.	Fund No. 9274 (Series A) or 9275 (Series F)	No. of Units to Redeem or Dollar Amount to Redeem		
				all units or	units	\$
			9274 (Series A) or 9275 (Series F)	all units or	units	\$
			9274 (Series A) or 9275 (Series F)	all units or	units	\$
			9274 (Series A) or 9275 (Series F)	all units or	units	\$
			9274 (Series A) or 9275 (Series F)	all units or	units	\$
			9274 (Series A) or 9275 (Series F)	all units or	units	\$

on the next available redemption date (the "Redemption Date") following receipt of this request. This Request for Redemption must be received at least 120 days (but not more than 180 days) prior to a Redemption Date. The registered Dealer or Advisor acknowledges and agrees that any Series A and Series F Units that are redeemed within three years of their issue date will be subject to an early redemption fee as described in the Offering Memorandum. Notices of redemptions may not be subsequently withdrawn by the registered Dealer or Advisor except in those circumstances described in the Offering Memorandum or, in extraordinary circumstances, with the Manager's consent.

Unless the Manager agrees otherwise, redemption proceeds will be paid to the client's Dealer.

Signature of Authorized Signatory (required)	
Name of Authorized Signatory	Date (MM/DD/YYYY)

Please email, fax, or mail a signed copy to

Email: processing@mackenzieinvestments.com

b) Signatures

(This e-mail box is only available for dealers who have signed our processing and TLS agreement.)

Fax Toll-Free: 866-766-6623; **Local:** (416) 922-5660

Mail: Mackenzie Financial Corporation 180 Queen Street West, Toronto, Ontario, M5V 3K1