

AUTHORIZATION FOR PRE-AUTHORIZED DEBITS

1. The Payor hereby certifies the accuracy of the following information:

Name: **PAYOR (the "Payor")**
Address:
Town:
State/Province:
Zip/Postal Code:
Telephone Number:
Account: _____ (the "Account")
Name of Payor's
Financial Institution: _____ (the "Processing Institution")

2. Attached to this Authorization is a specimen cheque of the Payor marked 'VOID'.

3. The Payor will notify the Payee, in writing, of any change in the information provided in Sections 1 and 2 of this Authorization _____ (____) days prior to the effective date of any such change.

4. The Payor hereby authorizes the Payee to draw on the Account with the Processing Institution (each a preauthorized debit or ("PAD")) to facilitate the payment of any and all monies owing by the Payor to PAYEE (the "Payee") including without limitation pursuant to a _____ Agreement dated _____ between the Payee and the Payor.

5. The Payor represents and warrants that all persons whose signatures are required to authorize withdrawals from the Account have signed this Authorization and that all persons signing this Authorization are the authorized signatories and are duly authorized to execute this Authorization.

6. This Authorization may be cancelled by the Payor at any time upon written notice to the Payee.

7. The Payor acknowledges that executing and delivering this Authorization to the Payee constitutes delivery by the Payor to the Processing Institution.

8. The Payor and the Payee each hereby waive any and all PAD pre-notification requirements otherwise required by Rule _____ of the Rules of _____.

9. The Payee may issue PADs in a dollar amount up to a maximum of \$_____ per day.

10. The Payor acknowledges that the Processing Institution is not required as a condition to honouring a PAD issued to verify that a PAD has been issued in accordance with the particulars of the Authorization, including without limitation the amount of the PAD and that the consideration for the payment for which the PAD was issued has been received by the Payee.

11. The revocation of this Authorization by the Payee does not terminate any contract for goods or services that exists between the Payee and the Payor. This Authorization applies only to the method of payment and does not otherwise have any bearing on the contract for goods or services exchanged.

12. The Payor may dispute a PAD only under the following conditions:

- (a) the PAD was not drawn in accordance with this Authorization; or
- (b) this Authorization was revoked.

THIS IS A 2-PAGE FORM.