

2359 ROYAL WINDSOR DRIVE UNIT 13 MISSISSAUGA, ONTARIO L5J 4S9 905-855-1334 FAX: 905-855-1375

www.traderscb.com

Single Entry Agreement/Credit Card Authorization

Please read the following before completing this agency agreement. An agent is considered in law to represent the principle, in such a way as to be able to affect the principle's legal position. However, the principle remains liable for any transactions completed on its behalf by its agent. The "Customer" hereby authorizes TRADERS CUSTOMS BROKERAGE LTD. to transact business on their behalf with the Canada Border Services Agency which may include the following:

- a) accounting and payment of duties in respect of imported goods released under section 32 of the Customs Act at all ports in Canada which may require the appointment of a sub-agent
- b) accessing Business Number import/export account(s) information
- c) processing of refunds and other adjustments
- d) other duties as required

REGISTERED LEGAL NAME:	
REGISTERED ADDRESS:	
IS FIRM A: [] LIMITED COMPANY [] PAR	RTNERSHIP []SOLE PROPRIETORSHIP
CONTACT:	PHONE NO :
FAX NO.:	FINAL ADDRESS.
CANADA REVENUE AGENCY GST REG. NO.:	RT:
CANADA BORDER SERVICES AGENCY IMPORT NO.:	RM:
THIS AGREEMENT SHALL BE VALID FOR RELEASE AND	D ACCOUNTING OF THE FOLLOWING SHIPMENT
PURCHASE ORDER NUMBER:	COMMERCIAL INVOICE NUMBER:
EXPORTERS NAME:	
DESCRIPTION OF GOODS IMPORTED:	
VALUE OF GOODS IMPORTED:	
Signatory for a company must be a director or officer of the	e company and be authorized to enter into contractual agreements
	e company and be authorized to enter into contractual agreements
SIGNATURE OF AUTHORIZED OFFICER:	DATED:
SIGNATURE OF AUTHORIZED OFFICER:	•
SIGNATURE OF AUTHORIZED OFFICER:	DATED:
SIGNATURE OF AUTHORIZED OFFICER:NAME:AUTHORIZATION FOR CREDIT CARD PAYMENT	DATED:
SIGNATURE OF AUTHORIZED OFFICER:	DATED:
SIGNATURE OF AUTHORIZED OFFICER:	DATED:
SIGNATURE OF AUTHORIZED OFFICER:	DATED:
SIGNATURE OF AUTHORIZED OFFICER: NAME: AUTHORIZATION FOR CREDIT CARD PAYMENT CREDIT CARD IS A: [] VISA [CREDIT CARD NUMBER EXPIRY DATE: CARD SECURITY NUMBER	DATED:
SIGNATURE OF AUTHORIZED OFFICER:	DATED:
SIGNATURE OF AUTHORIZED OFFICER:	DATED:
SIGNATURE OF AUTHORIZED OFFICER:	DATED:
SIGNATURE OF AUTHORIZED OFFICER: NAME: AUTHORIZATION FOR CREDIT CARD PAYMENT CREDIT CARD IS A: [] VISA [CREDIT CARD NUMBER EXPIRY DATE: CARD SECURITY NUMBER NAME ON CREDIT CARD: COMPANY (if a company card) FULL ADDRESS:	DATED: