



Centro Legal Works Inc.
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Requisition for Discharge or Renewal of a PPSA Financing Statement

Fax to 416.599.8655 or Email: search@centrolegalworks.com

Reg. No.	Invoice No.
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Client/ Billing Information	Your Name: _____	Date: _____
	Address: _____	File No: _____
	City, Province: _____	Postal: _____
	Tel: _____	Fax: _____
	Email: _____	

1. Registration Information	Original Registration Type: <input type="checkbox"/> PPSA (Personal Property Security Act)	<input type="checkbox"/> RSLA (Repair Storage Lien Act)
	PPSA File Reference Number: _____	9 Digit Number (example: 612345699) _____

2. Search Options (additional charges apply)	<input type="checkbox"/> PPSA Discharge only (draft provided prior to final registration for approval). (\$25+HST)
	<input type="checkbox"/> PPSA search prior to this registration to determine most current registrations. (add \$23+HST)
	<input type="checkbox"/> Post PPSA search after this registration to confirm after filing. (add \$23+GST)

3. (a) Original Individual Debtor	(Individual) First Name _____ Middle Initial _____ Surname (Last Name) _____	Date of Birth (dd/mm/yyyy) _____
	(If individual a Date of Birth must be provided)	
OR (b) Business Debtor	Business Debtor _____	Ontario Corporation No. _____
OR (c) Motor Vehicle	Year _____ Make _____ Model _____	VIN – Vehicle Identification Number _____

4. Select your option based on the original registration details provided above.	
<input type="checkbox"/> Option 1 – Full Discharge (C) (Discharges original registration and related amendments)	
<input type="checkbox"/> Option 2 – Renewal (B)	Number of years. (Indicate 1 to 25 years; 5 years maximum for Consumer Goods)

5. Notes or Other Instructions	
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6. Registering Agent (Confirmation will be mailed to this address)	<input type="checkbox"/> Same as Client/Billing information at the top of this form. Or, indicated below.			
	Complete Name _____			
	Address (Street – include Suite, Unit or Apt. No.) _____	City _____	Province _____	Postal Code _____

Confirmation and Payment Details:	Indicate the type of Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express
	Credit Card Number: _____
	Complete Name on the Card: _____
	Expiry Date: _____
	Cardholder Signature*:
*Signature is mandatory even if credit card information is not included. By signing above you agree to the terms and conditions indicated below and authorize the appropriate charges to the credit card provided.	

Please complete, sign and fax to 416.599.8655 or email to: search@centrolegalworks.com

Terms and Conditions: A PPSA Financing statement, amendment, or discharge has been prepared and approved by the above-named client based on details provided by the client. The client assumes full responsibility, acknowledges and is aware of the terms of the related General Security Agreement, contracts, or other related documents thereto. The client also acknowledges and is aware of the implications of registering a PPSA financing statement, amendment, or discharge, as applicable. Under no circumstances does Centro Legal Works Inc. ("Centro") provide advice on the particulars of the registration, amendment or discharge, as applicable, and therefore Centro is not responsible or liable to any person or entity whatsoever for any loss, damage(s), or claim.