



Reg. No.	Invoice No.
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<b>Billing Information</b>	<b>Your Name:</b> _____	<b>Date:</b> _____
	<b>Address:</b> _____	<b>File No:</b> _____
	<b>Tel:</b> _____	<b>Fax:</b> _____
	<b>Email:</b> _____	

<b>Registration Particulars:</b>	Registration Period (Years) _____	<input type="checkbox"/> <b>PPSA</b> (Personal Property Security Act)	<input type="checkbox"/> <b>RSLA</b> (Repair Storage Lien Act)	Caution Filing*: <input type="checkbox"/>	<b>*Collateral outside of Ontario or being brought into Ontario</b>
	Please register on this date: _____				

<b>1. Debtors</b> (a.k.a. Borrower) <b>First Debtor</b> If individual a Date of Birth must be provided)	(Individual) First Name _____	Middle Initial _____	Surname (Last Name) _____	Date of Birth (dd/mm/yyyy) _____	
	<b>OR Business Name</b> _____			Ontario Corporation No. _____	
	Address (Street – include Suite, Unit or Apt. No.) _____		City _____	Province _____	Postal Code _____

<b>Second Debtor</b>	(Individual) First Name _____	Middle Initial _____	Surname (Last Name) _____	Date of Birth (dd/mm/yyyy) _____	
	<b>OR Business Name</b> _____			Ontario Corporation No. _____	
	Address (Street – include Suite, Unit or Apt. No.) _____		City _____	Province _____	Postal Code _____

<b>2. Secured Party</b> (a.k.a. Lender)	Complete Name _____
	Address (Street – include Suite, Unit or Apt. No.) _____ City _____ Province _____ Postal Code _____

<b>3. Collateral Type</b>	<input type="checkbox"/> Consumer Goods <input type="checkbox"/> Inventory <input type="checkbox"/> Equipment <input type="checkbox"/> Accounts <input type="checkbox"/> Other <input type="checkbox"/> Motor Vehicle Included
	Amount Secured <u>.00</u> Date of Maturity (DD/MM/YYYY) _____      OR <input type="checkbox"/> No fixed Date of Maturity
<b>Motor Vehicle Description(s)</b>	Year _____ Make _____ Model _____ VIN – Vehicle Identification Number _____
	Year _____ Make _____ Model _____ VIN – Vehicle Identification Number _____

<b>4. General Collateral Description</b>	See attached for additional collateral description, or motor vehicle details (if required).      Approved characters ) ( + . ' & - / , % " \$ ? * < = !   > #
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<b>5. Registering Agent</b> (Confirmation will be mailed to this address)	Complete Name _____
	Address (Street – include Suite, Unit or Apt. No.) _____ City _____ Province _____ Postal Code _____

<b>PAYMENT:</b> (Signature is for payment purposes only; draft approval is still required)	Payment Type: <input type="checkbox"/> On Account <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express
	Credit Card Number: _____      Expiry Date: _____
	Complete Name on the Card: _____
	Cardholder Signature: _____ <a href="#">Click to pay online</a>
	Auth No: _____
	Amount: _____
	Auth Date: _____

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](mailto:search@centrolegalworks.com) for draft preparation.

**Terms and Conditions:** A draft PPSA Financing statement, amendment, or discharge (the 'Services') will be prepared for review and approval by the client based on registration information provided from the client who assumes full responsibility for accuracy of same. The client represents and warrants that it is aware of the terms of the related General Security Agreement, contracts, and/or other related documents thereto. The client acknowledges that it 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, legal or otherwise about the particulars of the Services requested by the client. It is recommended that the client obtain professional or legal advice about the Services to which this service relates to ensure it fits the client's needs. Client agrees to release waive (including the right to sue) and fully discharge Centro and its officers, directors, employees and agents from any and all claims, demands of any kind or nature and the client assumes all risks associated with the Services. By signing this agreement and the draft the client voluntarily elects to assume all risks associated with the Services.