

# BURROWES

courtiers d'assurances

## INTERMÉDIAIRES EN TRANSPORT - TRANSPORTEURS - EXPÉDITEURS

La présente a pour but de vous confirmer que Zurich Compagnie d'Assurances SA a émis une police d'assurance en faveur de l'assuré suivant :

### NOM ET ADRESSE DE L'ASSURÉ

C.A. Transport Inc.

1200 De Royan

Laval Québec H7N 6E7

No Police : TPP 9993118

DURÉE DU CONTRAT (A/M/J) : Du 2012-01-24 au 2013-01-24

### GARANTIES

### MONTANTS \*

\* TOUS LES MONTANTS INDIQUÉS SONT EN MONNAIE CANADIENNE

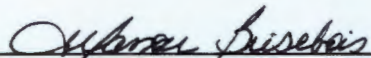
ASSURANCE AUTOMOBILE DU QUÉBEC - FORMULE DES PROPRIÉTAIRES (F.P.Q. No 1) CHAPITRE A - RESPONSABILITÉ CIVILE CHAPITRE B - DOMMAGES ÉPROUVÉS PAR LES VÉHICULES ASSURÉS	5 000 000 \$
DIVISION 1 - TOUS RISQUES	INCLUS
FAQ 27 Responsabilité civile du fait de dommages à des véhicules n'appartenant pas à l'assuré incluant les véhicules fournis par un employeur Montant max. par sinistre: 150 000 \$ Franchise Chapitre B - Dommages éprouvés par le véhicule assuré, Div. 1 - Tous risques: 5 000 \$ Type de véhicules: Camions porteurs, tracteurs, remorques et semi-remorques	
RESPONSABILITÉ CIVILE DES ENTREPRISES Limite de garantie par année d'assurance (5759) Limite de garantie par année d'assurance pour le risque Produits-Après travaux :5 000 000 \$ Limite de garantie globale par année d'assurance :20 000 000 \$ Franchise : 2 500 \$	5 000 000 \$
RESPONSABILITÉ CIVILE DES TRANSPORTEURS (CARGAISON) :	500 000 \$

### CONDITIONS SPÉCIALES

Les garanties précitées sont sujettes aux conditions, limitations et exclusions du contrat.

Si vous désirez obtenir un certificat d'assurance confirmant que les garanties précitées sont toujours valides, en vigueur et que le contrat émis par Zurich Compagnie d'Assurances SA n'a pas été résilié ou annulé, veuillez communiquer avec notre cabinet.

**William E. Burrowes Inc.**

  
Manon Brisebois  
450-655-6751 #207 ou 800-939-7757  
Télécopieur: 450-641-3860  
brisebois.manon@burrowes.ca

2012-01-13 [MB]

1570, boul. de Montarville, suite B  
Boucherville, Québec J4B 5Y3  
Fax: (450) 641-3860

# BURROWES

courtiers d'assurances

## SHIPPERS - LOAD BROKERS - CARRIERS

We hereby confirm that Zurich Compagnie d'Assurances SA has issued a policy in favour of the following insured :

### NAME AND ADDRESS OF INSURED

C.A. Transport Inc.

1200 De Royan

Laval Québec H7N 6E7

Policy Number : TPP 9993118

POLICY PERIOD (Y/M/D) : 2012-01-24 to 2013-01-24

### COVERAGES

### AMOUNTS \*

\* ALL AMOUNTS MENTIONED ARE IN CANADIAN CURRENCY

QUEBEC AUTOMOBILE INSURANCE POLICY (Q.P.F. No 1) -  
OWNER'S FORM

SECTION A - CIVIL LIABILITY

\$ 5 000 000.

SECTION B - LOSS OF DAMAGE TO INSURED VEHICLES

SUBSECTION 1 - ALL PERILS

INCLUDED

QEF 27 Civil liability resulting from damage to non-owned automobiles endorsement including  
automobiles provided by an employer

Maximum amount per occurrence: \$ 150 000.

Deductible Section B - Damage caused to insured vehicle, Subsection 1 - All perils : \$ 5 000.

Type of vehicles : Straightbody, tractors, trailers and semi-trailers

COMMERCIAL GENERAL LIABILITY

\$ 5 000 000.

Aggregate Limit (form 5759)

Products - Completed Operations Aggregate Limit : \$ 5 000 000.

General Aggregate Limit : \$ 20 000 000.

Deductible : \$ 2 500.

TRUCKMAN'S LIABILITY (CARGO) :

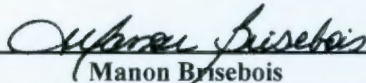
\$ 500 000.

### SPECIAL CONDITIONS

The above mentioned coverages are subject to the clauses, conditions and exclusions of the policy.

If you wish to obtain a certificate of insurance confirming that the above coverage is still valid and continuous and that the said policy issued by Zurich Compagnie d'Assurances SA has not been cancelled, please contact our office.

**William E. Burrowes Inc.**

  
Manon Brisebois

450-655-6751 #207 or 800-939-7757


Fax: 450-641-3860

brisebois.manon@burrowes.ca

2012-01-13 [MB]

1570, boul. de Montarville, suite B  
Boucherville, Québec J4B 5Y3  
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Commission  
des transports

Québec 

## Registre des propriétaires et des exploitants de véhicules lourds

Renseignements à jour en date du 2012-01-20 06:50

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**Nom :** C.A. TRANSPORT INC.

**Adresse d'affaires :** 1200, rue De Royan  
Laval (Québec) H7N 6E7

**NIR :** R-507204-7  
Le NIR correspond au numéro de Code canadien de la sécurité

**Titre :** Propriétaire et exploitant

**Catégorie de transport :** Marchandises

**Cote de sécurité :** Satisfaisant

**Droit de mettre en circulation :** Oui

**Droit d'exploiter :** Oui

**Date d'inscription au registre :** 1999-04-01 00:00

Le Registre des propriétaires et des exploitants de véhicules lourds est mis à jour quotidiennement.  
Vous pouvez en tout temps le consulter au [www.ctq.gouv.qc.ca](http://www.ctq.gouv.qc.ca) ou au 1888 461-2433.

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Québec 

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C A TRANSPORT INC

DOT#:662308



The SMS provides an assessment of a motor carrier's on-road performance and investigation results within the Behavior Analysis and Safety Improvement Categories (BASICs). Assessments cover 24 months of activity and results are updated monthly. For current Motor Carrier Safety Ratings visit SAFER and for current operating authority and insurance information visit Licensing and Insurance (L&I) system.

Select a BASIC below to view details

BASICs Overview (Based on a 24-month record ending December 16, 2011)	PERFORMANCE		BASICs Status
	On-Road	Investigation	
Unsafe Driving	Inconclusive		=
Fatigued Driving (Hours-of-Service)	Inconclusive		=
Driver Fitness	No Violations		=
Controlled Substances and Alcohol	No Violations		=
Vehicle Maintenance	7%		=
Cargo-Related	Not Public		=
Crash Indicator	Not Public		=

SUMMARY OF ACTIVITIES

	Number	OOS Rate
<b>Total Inspections:</b>	22	
Vehicle Inspections:	14	0 %
Driver Inspections:	21	0 %
Hazardous Materials Inspections:	0	0 %
HM Placard Inspections:	0	0 %
<b>Total Crashes:</b>	0	
Tow-aways:	0	
Injuries/Fatalities:	0	

RECENT INVESTIGATIONS

There are no recent investigations.

ICON LEGEND



Serious violation cited within last 12 months from an investigation.



Denotes this carrier exceeds the FMCSA intervention threshold relative to its safety event grouping based upon roadside data and/or has been cited with one or more serious violations within the past 12 months during an investigation. Therefore, this carrier may be prioritized for an intervention action and roadside inspection.

Carrier Registration Information as of December 16, 2011

<b>Legal Name:</b>	C A Transport Inc	<b>Vehicle Miles Traveled:</b>	160,000
<b>DBA Name:</b>		<b>VMT Year:</b>	2010
<b>DOT#:</b>	662308	<b>Power Units:</b>	26
<b>MC or MX#:</b>	MC-369273	<b>DUNS Number:</b>	
<b>Address:</b>	1200 De Royan Laval, QC H7N 6E7	<b>Drivers:</b>	11
<b>Telephone:</b>	(450) 668-5203	<b>Carrier Operation:</b>	Interstate
<b>Fax:</b>	(450) 667-9914	<b>Passenger:</b>	No
<b>Email:</b>	nicolas.petit@catransport.com	<b>Subject to Placardable HM Threshold:</b>	No
		<b>HHG:</b>	No
		<b>New Entrant</b>	No

Operation Classification:

<input checked="" type="checkbox"/> AUTHORIZED FOR HIRE	<input type="checkbox"/> EXEMPT FOR HIRE	<input type="checkbox"/> PRIVATE PROPERTY
<input type="checkbox"/> PRIVATE PASSENGER, BUSINESS	<input type="checkbox"/> PRIVATE PASSENGER, NON-BUSINESS	<input type="checkbox"/> MIGRANT
<input type="checkbox"/> U. S. MAIL	<input type="checkbox"/> FEDERAL GOVERNMENT	<input type="checkbox"/> STATE GOVERNMENT
<input type="checkbox"/> LOCAL GOVERNMENT	<input type="checkbox"/> INDIAN TRIBE	<input type="checkbox"/> OTHER


Cargo Carried:


<input checked="" type="checkbox"/> GENERAL FREIGHT	<input type="checkbox"/> HOUSEHOLD GOODS	<input type="checkbox"/> METAL; SHEETS, COILS, ROLLS
<input type="checkbox"/> MOTOR VEHICLES	<input type="checkbox"/> DRIVE AWAY/TOWAWAY	<input type="checkbox"/> LOGS, POLES, BEAMS, LUMBER
<input type="checkbox"/> BUILDING MATERIALS	<input type="checkbox"/> MOBILE HOMES	<input type="checkbox"/> MACHINERY, LARGE OBJECTS
<input type="checkbox"/> FRESH PRODUCE	<input type="checkbox"/> LIQUIDS/GASES	<input type="checkbox"/> INTERMODAL CONTAINERS
<input type="checkbox"/> PASSENGERS	<input type="checkbox"/> OIL FIELD EQUIPMENT	<input type="checkbox"/> LIVESTOCK
<input type="checkbox"/> GRAIN, FEED, HAY	<input type="checkbox"/> COAL, COKE	<input type="checkbox"/> MEAT
<input type="checkbox"/> GARBAGE, REFUSE, TRASH	<input type="checkbox"/> U.S. MAIL	<input type="checkbox"/> CHEMICALS
<input type="checkbox"/> COMMODITIES DRY BULK	<input type="checkbox"/> REFRIGERATED FOOD	<input type="checkbox"/> BEVERAGES
<input type="checkbox"/> PAPER PRODUCTS	<input type="checkbox"/> UTILITY	<input type="checkbox"/> FARM SUPPLIES
<input type="checkbox"/> CONSTRUCTION	<input type="checkbox"/> WATER WELL	<input type="checkbox"/> OTHER

Vehicle Type Breakdown			
Vehicle Type	Owned	Term Leased	Trip Leased
Straight Trucks	3		
Truck Tractors	23		
Trailers*	48		
Hazmat Cargo Tank Trailers*			
Hazmat Cargo Tank Trucks			
Motor Coach			
School Bus 1-8 Passengers			
School Bus 9-15 Passengers			
School Bus 16+ Passengers			
Mini-Bus 16+ Passengers			
Van 1-8 Passengers			
Van 9-15 Passengers			
Limousine 1-8 Passengers			
Limousine 9-15 Passengers			
Limousine 16+ Passengers			

\* Indicates power units not used by the Carrier Safety Measurement System when calculating total power units.

#### USE OF SMS DATA/INFORMATION

The data in the Safety Measurement System (SMS) is performance data used by the Agency and Enforcement Community. A  symbol, based on that data, indicates that FMCSA may prioritize a motor carrier for further monitoring.

The  symbol is not intended to imply any federal safety rating of the carrier pursuant to 49 USC 31144. Readers should not draw conclusions about a carrier's overall safety condition simply based on the data displayed in this system. Unless a motor carrier in the SMS has received an UNSATISFACTORY safety rating pursuant to 49 CFR Part 385, or has otherwise been ordered to discontinue operations by the FMCSA, it is authorized to operate on the nation's roadways.



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Federal Motor Carrier Safety Administration  
1200 New Jersey Avenue SE, Washington, DC 20590 • 1-800-832-5660 • TTY: 1-800-877-8339 • [Field Office Contacts](#)

A Federal Agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2126-0008. Public reporting burden for this collection of information is estimated to average approximately 2 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRA, Washington, D.C. 20590.



U.S. Department of Transportation  
Federal Motor Carrier  
Safety Administration

**ENDORSEMENT FOR MOTOR CARRIER POLICIES OF INSURANCE FOR  
PUBLIC LIABILITY UNDER SECTIONS 29 AND 30 OF THE MOTOR  
CARRIER ACT OF 1980**

Issued to C.A. TRANSPORT INC. of 1200 DE ROYAN, LAVAL, QC H7N 6E7

Dated at Schaumburg this 24th day of JANUARY, 20 12

Amending Policy No TPP9993118 Effective Date JANUARY 24TH, 2012

Name of Insurance Company ZURICH AMERICAN INSURANCE COMPANY

Countersigned by Ruth J. Brannon  
Authorized Company Representative

The policy to which this endorsement is attached provides primary or excess insurance, as indicated by "[X]," for the limits shown:  
 This insurance is primary and the company shall not be liable for amounts in excess of \$ 750 000 for each accident.  
 This insurance is excess and the company shall not be liable for amounts in excess of \$ \_\_\_\_\_ for each accident in excess of the underlying limit of \$ \_\_\_\_\_ for each accident.

Whenever required by the Federal Motor Carrier Safety Administration (FMCSA), the company agrees to furnish the FMCSA a duplicate of said policy and all its endorsements. The company also agrees, upon telephone request by an authorized representative of the FMCSA, to verify that the policy is in force as of a particular date. The telephone number to call is: (814) 393-6128

Cancellation of this endorsement may be effected by the company or the insured by giving (1) thirty-five (35) days notice in writing to the other party (said 35 days notice to commence from the date the notice is mailed, proof of mailing shall be sufficient proof of notice), and (2) if the insured is subject to the FMCSA's registration requirements under 49 U.S.C. 13901, by providing thirty (30) days notice to the FMCSA (said 30 days notice to commence from the date the notice is received by the FMCSA at its office in Washington, D.C.).

**DEFINITIONS AS USED IN THIS ENDORSEMENT**

**Accident** includes continuous or repeated exposure to conditions which results in bodily injury, property damage, or environmental damage which the insured neither expected nor intended.

**Property Damage** means damage to or loss of use of tangible property.

**Motor Vehicle** means a land vehicle, machine, truck, tractor, trailer, or semitrailer propelled or drawn by mechanical power and used on a highway for transporting property, or any combination thereof.

**Environmental Restoration** means restitution for the loss, damage, or destruction of natural resources arising out of the accidental discharge, dispersal, release or escape into or upon the land, atmosphere, watercourse, or body of water, of any commodity transported by a motor carrier. This shall include the cost of removal and the cost of necessary measures taken to minimize or mitigate damage to human health, the natural environment, fish, shellfish, and wildlife.

**Bodily Injury** means injury to the body, sickness, or disease to any person, including death resulting from any of these.

**Public Liability** means liability for bodily injury, property damage, and environmental restoration.

The insurance policy to which this endorsement is attached provides automobile liability insurance and is amended to assure compliance by the insured, within the limits stated herein, as a motor carrier of property, with Sections 29 and 30 of the Motor Carrier Act of 1980 and the rules and regulations of the Federal Motor Carrier Safety Administration (FMCSA).

endorsement thereon, or violation thereof, shall relieve the company from liability or from the payment of any final judgment, within the limits of liability herein described, irrespective of the financial condition, insolvency or bankruptcy of the insured. However, all terms, conditions, and limitations in the policy to which the endorsement is attached shall remain in full force and effect as binding between the insured and the company. The insured agrees to reimburse the company for any payment made by the company on account of any accident, claim, or suit involving a breach of the terms of the policy, and for any payment that the company would not have been obligated to make under the provisions of the policy except for the agreement contained in this endorsement.

In consideration of the premium stated in the policy to which this endorsement is attached, the insurer (the company) agrees to pay, within the limits of liability described herein, any final judgment recovered against the insured for public liability resulting from negligence in the operation, maintenance or use of motor vehicles subject to the financial responsibility requirements of Sections 29 and 30 of the Motor Carrier Act of 1980 regardless of whether or not each motor vehicle is specifically described in the policy and whether or not such negligence occurs on any route or in any territory authorized to be served by the insured or elsewhere. Such insurance as is afforded, for public liability, does not apply to injury to or death of the insured's employees while engaged in the course of their employment, or property transported by the insured, designated as cargo. It is understood and agreed that no condition, provision, stipulation, or limitation contained in the policy, this endorsement, or any other

It is further understood and agreed that, upon failure of the company to pay any final judgment recovered against the insured as provided herein, the judgment creditor may maintain an action in any court of competent jurisdiction against the company to compel such payment.

The limits of the company's liability for the amounts prescribed in this endorsement apply separately to each accident and any payment under the policy because of any one accident shall not operate to reduce the liability of the company for the payment of final judgments resulting from any other accident.

THE SCHEDULE OF LIMITS SHOWN ON THE REVERSE SIDE DOES NOT PROVIDE COVERAGE. The limits shown in the schedule are for information purposes only.



1200, De Royan  
 Laval (Québec) H7N 6E7  
 Bureau / Office: (450) 668-5203  
 Sans frais : (800) 668-5203  
 Télécopieur / Fax.: (450) 667-9914

**URGENT**

[www.catransport.com](http://www.catransport.com)

**Demande d'ouverture de compte / Request for a line of credit**

Nom légal de l'entreprise / Legal name		Raison sociale utilisée / Usual name used		
Adresse / Address		Ville / City	Prov / Prov.	Code postal / Postal code
N° Téléphone / Phone	N° Télécopieur / Fax	Date de création de l'entreprise / Starting date	Secteur d'activité / Activity	
Nom du dirigeant / Owner name	Titre / Title		Courriel / Email	
Responsable des comptes payables / Accounts payable contact		Courriel / Email		N° Téléphone / Phone

**Fournisseurs / Suppliers 1**

Nom légal de la compagnie / Company name		N° Téléphone / Phone	N° Télécopieur / Fax	
Adresse / Address		Ville / City	Prov / Prov.	Code postal / Postal code
Personne contact / Contact person		Titre / Title	Crédit autorisé / Line authorized credit	Crédit utilisé / Line used credit

**Fournisseurs / Suppliers 2**

Nom légal de la compagnie / Company name		N° Téléphone / Phone	N° Télécopieur / Fax	
Adresse / Address		Ville / City	Prov / Prov.	Code postal / Postal code
Personne contact / Contact person		Titre / Title	Crédit autorisé / Line authorized	Crédit utilisé / Line used

**Fournisseurs / Suppliers 3**

Nom légal de la compagnie / Company name		N° Téléphone / Phone	N° Télécopieur / Fax	
Adresse / Address		Ville / City	Prov / Prov.	Code postal / Postal code
Personne contact / Contact person		Titre / Title	Crédit autorisée/ Line authorized	Crédit utilisé / Line used

**Information bancaire / Financial information**

Nom de la banque / Bank name		N° Téléphone / Phone	N° Télécopieur / Fax	
Adresse / Address		Ville / City	Prov / Prov.	Code postal / Postal code
N° Compte: / Account #	Directeur de compte: / Account manager		Client depuis quand / Client since when	
Prêts (Total des sommes) / Loan(s) (total amounts) \$	Marge de crédit autorisée / Line of credit authorized \$		Marge de crédit utilisée / Line of credit used \$	

**Consentement**

En signant le présent formulaire, le demandeur confirme avoir lu et compris toutes les clauses de la section **TERMES ET CONDITIONS**. Les renseignements fournis sur ce formulaire seront utilisés pour l'évaluation d'une ouverture de compte, maintenir le crédit ouvert, révision périodique et la perception de toute somme due. La convention et le consentement demeureront valides pour toute la durée de la relation d'affaire sans limite dans le temps. Le demandeur autorise sa et/ou ses banque(s) d'affaire(s) ainsi que tous ses fournisseurs à fournir et échanger toute information à **C.A. Transport Inc.** et/ou son mandataire quant à ses comptes, placements, prêts, marge et autres, en vue d'établir sa solvabilité et les dégage de toute responsabilité quant à la transmission de ces informations. Le demandeur déclare que toutes les informations fournies sur cette demande sont véridiques. La présente demande pourrait être annulée si ces informations devaient se révéler inexactes.

Signature : \_\_\_\_\_ Date: \_\_\_\_\_

Nom et Titre : \_\_\_\_\_

**Acknowledgement**

By signing the present form, the applicant confirms having read and understood all the clauses of the section **TERMS AND CONDITIONS**. The information supplied on this form will be used for the evaluation of an opening line of credit, to maintain the opened credit, the periodic revision and the perception of any due sum. The agreement and the assent will remain valid for all the duration of the business relation without limit in time. The applicant authorizes his (her, its) and/or his (her) business bank (s) as well as all his (her) suppliers to provide and exchange any information to **C.A. Transport Inc.** and/or his (her) representative as for his accounts, investments, loans, margin and the others, to establish his solvency and loosens them of quite responsibility as for the transmission of those information. The applicant declares that all the information supplied on this demand is true. The present demand could be cancelled if this information was to show inaccurate.

Signature : \_\_\_\_\_ Date: \_\_\_\_\_

Name and Title : \_\_\_\_\_

## Termes et conditions/Terms and Condition

### Élection de domicile :

Les parties élisent domicile dans le district judiciaire de Laval. Cette convention est soumise aux lois et règlements en vigueur au Québec.

### Modalités de paiements :

Le paiement est dû net 30 jours après la date d'émission de la facture si son compte est en règle. Des frais d'administration de 2% par mois (26.82% par année) seront ajoutés à tout compte en souffrance jusqu'à parfait paiement.

### Défaut:

Le demandeur s'engage à informer *C.A. Transport Inc.* dès que survient un changement à son actionariat ainsi de toute situation susceptible d'affecter sa situation financière. *C.A. Transport Inc.* peut suspendre et/ou fermer le compte à sa seule discrétion, suspendre/arrêter les travaux et/ou livraisons en cours et exiger le paiement immédiat de toute somme due et à venir. En cas de défaut envers cette convention, l'acheteur convient de payer à *C.A. Transport Inc.* 30% du solde dû à titre de dommages-intérêts liquidés ainsi que les frais de recouvrement advenant que le compte doit être placé auprès d'une agence de recouvrement. Des frais judiciaires et extrajudiciaires n'excédant pas 30% du solde dû et des dommages-intérêts liquidés s'appliqueront advenant le cas où le compte serait soumis à un tribunal pour recouvrer les sommes dues. Les frais de chèque retournés sont à la charge du demandeur.

### Information:

L'acheteur déclare aussi que toutes les informations qu'il a fournies sont vraies et on permettra à *C.A. Transport Inc.* d'annuler tous les accords s'ils arrivent d'être faux. L'acheteur informera *C.A. Transport Inc.* de tous changements qui peuvent affecter sa solvabilité. Le fichier de l'acheteur sera gardé confidentiel dans les bureaux de *C.A. Transport Inc.* et sera disponible à l'acheteur à sa demande.

### Choice of residence :

The parties elect place of residence in the judicial district of Laval. This agreement is subjected to the laws and the regulations current in Quebec.

### Terms of payment:

The payment is due net 30 days after the date of emission of the invoice if its account respects. Administration charges of 2 % per month (26.82 % a year) will be added to any over due account until full payment.

### Default:

The applicant makes a commitment to inform *C.A. Transport Inc.* as soon as arises a change in its shareholding so of any situation susceptible to affect its financial situation. *C.A. Transport Inc.* can suspend and/or close the account in her (his) discretion, suspend / stop the works and/or the current deliveries and require the immediate payment of any due sum. In case of default to this agreement, the applicant agrees to pay to *C.A. Transport Inc.* 30 % of the balance owed as liquidated damages as well as happening collection charges if the account must be placed with a collection agency. Judicial expenses and extrajudicial not exceeding (irritating) 30 % of the due balance and the liquidated damages will apply in the case where the account would be subjected to a court of justice to recover the due sums. The expenses for returned check are chargeable to the applicant.

### Information :

The applicant also declares that all information he/she supplied is true and *C.A. Transport Inc.* will be allowed to cancel all agreements if they happen to be false. The applicant will inform *C.A. Transport Inc.* of all changes that may affect his solvency. The applicant's file will be kept confidential in *C.A. Transport Inc.* office and will be available to the applicant at his request in advance.

### Au courant des cinq dernières années avez-vous ? :

Eu des poursuites judiciaires intentées contre votre entreprise? Oui  Non

Été placé en recouvrement par l'un de vos fournisseurs? Oui  Non

### Signature :

Signé à \_\_\_\_\_  
Date \_\_\_\_\_  
Signature \_\_\_\_\_  
Nom et Titre \_\_\_\_\_

### In the past five years did you ever :

Had any legal procedures taken against your company?: Yes  No

Had been placed in recovery by one of your suppliers? : Yes  No

### Signature:

Signed at \_\_\_\_\_  
Date \_\_\_\_\_  
Signature \_\_\_\_\_  
Name & Title \_\_\_\_\_

### Cautionnement :

En signant le présent cautionnement, le signataire se porte caution, conjointement et solidairement avec l'entreprise de toute somme qui sera due à *C.A. Transport Inc.*, et ce sans limite dans le temps. Il autorise le fournisseur et/ou son mandataire à recueillir et échanger des informations relatives à son crédit et sa situation financière personnelle et commerciale avec les bureaux de crédit : Equifax, Trans-Union et autres. De plus, il autorise expressément son institution financière, déclarée ou non déclarée, à transmettre à *C.A. Transport Inc.* et/ou son mandataire toutes les informations relatives à sa situation financière et sa relation auprès d'eux. Il les dégage de toutes conséquences et renonce à toute poursuite contre eux que pourrait avoir la divulgation de ces informations.

Nom : \_\_\_\_\_ DDN : \_\_\_\_\_

NAS : \_\_\_\_\_ Tel : \_\_\_\_\_

Adresse : \_\_\_\_\_

Ville : \_\_\_\_\_ Prov: \_\_\_\_\_

Code postal : \_\_\_\_\_

Signature : \_\_\_\_\_ Date: \_\_\_\_\_

### Personnel guarantee :

By signing this personal endorsement, the signatory guarantees, jointly and solidarity with the company of any sum which will be due to *C.A. Transport Inc.* and it without limit in time. He/She authorizes the *C.A. Transport Inc.* and/or his representative to collect and exchange information relative to his credit and his personal and commercial financial situation with the Credit Bureau: Equifax, Trans-Union and the others. Furthermore, it authorizes expressly it's financial, declared or not declared institution, to pass on to *C.A. Transport Inc.* and/or his representative all the information relative to it's financial situation and it's relation with them. It releases them of any consequences and gives up any legal measure against them that the disclosure of this information could have.

Name : \_\_\_\_\_ :

ISN : \_\_\_\_\_ Tel : \_\_\_\_\_

Address : \_\_\_\_\_

Town : \_\_\_\_\_ State: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Signature : \_\_\_\_\_ Date: \_\_\_\_\_