Worksheet
Leasing

Suite: 1702 **Tower:** PSV **Date:** Apr. 26/17 **Completed by:** Silvi

Khalid Algwaiz

Please mark if completed:

- ✓ ● Copy of 'Lease Prior to Closing' Amendment
- ✓ ● Copy of Lease Agreement
- ✓ ● Certified Deposit Cheque for Top up Deposit to ~~25%~~ 20% payable to Blaney McMurtry LLP in Trust Paid on occupancy
- ✓ ● Certified Deposit Cheque for leasing fee as per the Leasing Amendment payable to Amacon City Centre Seven New Development Partnership. Courier to Dragana at Amacon Head office (Toronto). $500 + HST
- ✓ ● Agreement must be in good standing. Funds in Trust: $ 52,434.
- ✓ ● Copy of Tenant's ID
- ✓ ● Copy of Tenant's First and Last Month Rent Rec'd Apr. 27/17
- ✓ ● Copy of Tenant's employment letter or paystub
- ✓ ● Copy of Credit Check
- ✓ ● Copy of the Purchasers Mortgage approval
- ✓ ● The elevator will not be allowed to be booked until all of the Above items have been completed and submitted

Administration Notes:

_____

_____

_____

_____

_____

_____

PSV - TOWER ONE

AMENDMENT TO AGREEMENT OF PURCHASE AND SALE

LEASE PRIOR TO CLOSING

Between: **AMACON DEVELOPMENT (CITY CENTRE) CORP.** (the **"Vendor"**) and
KHALID ALGWAIZ (the **"Purchaser"**)

Suite **1702** Tower **ONE** Unit **2** Level **16** (the **"Unit"**)

It is hereby understood and agreed between the Vendor and the Purchaser that the following changes shall be made to the Agreement of Purchase and Sale executed by the Purchaser and accepted by the Vendor (the **"Agreement"**) and, except for such changes noted below, all other terms and conditions of the Agreement shall remain the same and time shall continue to be of the essence:

Insert:

Notwithstanding paragraph 22 of this Agreement, the Purchaser shall be entitled to seek the Vendor's approval to assign the occupancy licence set out in Schedule C to the Agreement to a third party, on the following terms and conditions:

(a) the Purchaser pays to the Blaney McMurtry, in Trust the amount required to bring the deposits for the Residential Unit to an amount equal to twenty percent (20%) of the Purchase Price by the Occupancy Date;

(b) the Purchaser is not in default at any time under the Agreement.

(c) the Purchaser covenants and agrees to indemnify and hold harmless the Vendor, its successors and assigns (and their officers, shareholders and directors) from any and all costs, liabilities and/or expenses which it has or may incur as a result of the assignment of Occupancy Licence, any damage caused by the sublicencee to the Residential Unit or the balance of the Property by the sublicencee (including, but not limited to, any activities of the sublicencee which may lead to a delay in registration of the proposed condominium) inclusive of any and all costs and expenses(including legal costs on a substantial indemnity basis) that the Vendor may suffer or incur to terminate the Occupancy Licence and enforce the Vendor's rights under the Agreement;

(d) the Vendor shall have the right in its sole discretion to pre approve the sublicencee including, but not limited to, a review of the sublicencee's personal credit history and the terms of any arrangement made between the Purchaser and the sublicencee;

(e) the Purchaser shall deliver with the request for approval a certified cheque in the amount of Five Hundred Dollars ($500.00) plus applicable taxes for the administrative costs of the Vendor in reviewing the application for consent, which sum shall be non refundable.

ALL other terms and conditions set out in the Agreement shall remain the same and time shall continue to be of the essence.

IN WITNESS WHEREOF the parties have executed this Agreement

DATED at **Mississauga, Ontario** this 26th day of April **2017.**

Witness: _____

Purchaser: **KHALID ALGWAIZ**

THE UNDERSIGNED hereby accepts this offer.

DATED at Mississauga this 27 day of April **2017.**

AMACON DEVELOPMENT (CITY CENTRE) CORP.

PER: _____
Authorized Signing Officer
I have the authority to bind the Corporation

OREA Ontario Real Estate Association

Form 400
for use in the Province of Ontario

Agreement to Lease
Residential

Toronto Real Estate Board

This Agreement to Lease dated this 24 day of April, 20 17

TENANT (Lessee), Shakil A. Khan
(Full legal names of all Tenants)

LANDLORD (Lessor), ~~Samer Hendawi~~ Khalid Algwaiz
(Full legal name of Landlord)

ADDRESS OF LANDLORD .....
(Legal address for the purpose of receiving notices)

The Tenant hereby offers to lease from the Landlord the premises as described herein on the terms and subject to the conditions as set out in this Agreement.

1. **PREMISES:** Having inspected the premises and provided the present tenant vacates, I/we, the Tenant hereby offer to lease, premises known as: #1702-4011 Brickstone Mews, Mississauga, Ontario L5B 0K7

2. **TERM OF LEASE:** The lease shall be for a term of 1 Year commencing May 1st, 2017

3. **RENT:** The Tenant will pay to the said Landlord monthly and every month during the said term of the lease the sum of One Thousand Nine Hundred Seventy-Five Canadian Dollars (CDN$ 1,975.00), payable in advance on the first day of each and every month during the currency of the said term. First and last months' rent to be paid in advance upon completion or date of occupancy, whichever comes first.

4. **DEPOSIT AND PREPAID RENT:** The Tenant delivers Upon Acceptance
(Herewith/Upon acceptance/as otherwise described in this Agreement)
by negotiable cheque payable to West-100 Metro View Realty LTD., Brokerage, In Trust, "Deposit Holder" in the amount of Three Thousand Nine Hundred Fifty Canadian Dollars (CDN$ 3,950.00) as a deposit to be held in trust as security for the faithful performance by the Tenant of all terms, covenants and conditions of the Agreement and to be applied by the Landlord against the First and Last month's rent. If the Agreement is not accepted, the deposit is to be returned to the Tenant without interest or deduction.

For the purposes of this Agreement, "Upon Acceptance" shall mean that the Tenant is required to deliver the deposit to the Deposit Holder within 24 hours of the acceptance of this Agreement. The parties to this Agreement hereby acknowledge that, unless otherwise provided for in this Agreement, the Deposit Holder shall place the deposit in trust in the Deposit Holder's non-interest bearing Real Estate Trust Account and no interest shall be earned, received or paid on the deposit.

5. **USE:** The Tenant and Landlord agree that unless otherwise agreed to herein, only the Tenant named above and any person named in a Rental Application completed prior to this Agreement will occupy the premises.

Premises to be used only for: .....

6. **SERVICES AND COSTS:** The cost of the following services applicable to the premises shall be paid as follows:

	LANDLORD	TENANT		LANDLORD	TENANT
Gas	☒	☐	Cable TV	☐	☐
Oil	☐	☐	Condominium/Cooperative fees	☒	☐
Electricity	☐	☒	Garbage Removal	☒	☐
Hot water heater rental	☐	☒	Other:	☐	☐
Water and Sewerage Charges	☒	☐	Other:	☐	☐

The Landlord will pay the property taxes, but if the Tenant is assessed as a Separate School Supporter, Tenant will pay to the Landlord a sum sufficient to cover the excess of the Separate School Tax over the Public School Tax, if any, for a full calendar year, said sum to be estimated on the tax rate for the current year, and to be payable in equal monthly installments in addition to the above mentioned rental, provided however, that the full amount shall become due and be payable on demand of the Tenant.

INITIALS OF TENANT(S): [signature] **INITIALS OF LANDLORD(S):** [signature]

7. **PARKING:** One Parking Spot

8. **ADDITIONAL TERMS:** One Owner Locker Included

9. **SCHEDULES:** The schedules attached hereto shall form an integral part of this Agreement to Lease and consist of: Schedule(s) A ,B

10. **IRREVOCABILITY:** This offer shall be irrevocable by Tenant (Landlord/Tenant) until 11:59 p.m. on the 25 day of April 2017 after which time if not accepted, this Agreement shall be null and void and all monies paid hereon shall be returned to the Tenant without interest or deduction.

11. **NOTICES:** The Landlord hereby appoints the Listing Brokerage as agent for the Landlord for the purpose of giving and receiving notices pursuant to this Agreement. Where a Brokerage (Tenant's Brokerage) has entered into a representation agreement with the Tenant, the Tenant hereby appoints the Tenant's Brokerage as agent for the purpose of giving and receiving notices pursuant to this Agreement. **Where a Brokerage represents both the Landlord and the Tenant (multiple representation), the Brokerage shall not be appointed or authorized to be agent for either the Tenant or the Landlord for the purpose of giving and receiving notices.** Any notice relating hereto or provided for herein shall be in writing. In addition to any provision contained herein and in any Schedule hereto, this offer, any counter-offer, notice of acceptance thereof or any notice to be given or received pursuant to this Agreement or any Schedule hereto (any of them, "Document") shall be deemed given and received when delivered personally or hand delivered to the Address for Service provided in the Acknowledgement below, or where a facsimile number or email address is provided herein, when transmitted electronically to that facsimile number or email address, respectively, in which case, the signature(s) of the party (parties) shall be deemed to be original.

FAX No.: ..... (For delivery of Documents to Landlord) FAX No.: ..... (For delivery of Documents to Tenant)

Email Address: ..... (For delivery of Documents to Landlord) Email Address: solomunstefan@gmail.com (For delivery of Documents to Tenant)

12. **EXECUTION OF LEASE:** Lease shall be drawn by the Landlord on the Landlord's standard form of lease, and shall include the provisions as contained herein and in any attached schedule, and shall be executed by both parties before possession of the premises is given. The Landlord shall provide the tenant with information relating to the rights and responsibilities of the Tenant and information on the role of the Landlord and Tenant Board and how to contact the Board. (Information For New Tenants as made available by the Landlord and Tenant Board and available at www.ltb.gov.on.ca)

13. **ACCESS:** The Landlord shall have the right, at reasonable times to enter and show the demised premises to prospective tenants, purchasers or others. The Landlord or anyone on the Landlord's behalf shall also have the right, at reasonable times, to enter and inspect the demised premises.

14. **INSURANCE:** The Tenant agrees to obtain and keep in full force and effect during the entire period of the tenancy and any renewal thereof, at the Tenant's sole cost and expense, fire and property damage and public liability insurance in an amount equal to that which a reasonably prudent Tenant would consider adequate. The Tenant agrees to provide the Landlord, upon demand at any time, proof that said insurance is in full force and effect and to notify the Landlord in writing in the event that such insurance is cancelled or otherwise terminated.

15. **RESIDENCY:** The Landlord shall forthwith notify the Tenant in writing in the event the Landlord is, at the time of entering into this Agreement, or becomes during the term of the tenancy, a non-resident of Canada as defined under the Income Tax Act, RSC 1985, c. 1 (ITA) as amended from time to time, and in such event the Landlord and Tenant agree to comply with the tax withholding provisions of the ITA.

16. **USE AND DISTRIBUTION OF PERSONAL INFORMATION:** The Tenant consents to the collection, use and disclosure of the Tenant's personal information by the Landlord and/or agent of the Landlord, from time to time, for the purpose of determining the creditworthiness of the Tenant for the leasing, selling or financing of the premises or the real property, or making such other use of the personal information as the Landlord and/or agent of the Landlord deems appropriate.

17. **CONFLICT OR DISCREPANCY:** If there is any conflict or discrepancy between any provision added to this Agreement (including any Schedule attached hereto) and any provision in the standard pre-set portion hereof, the added provision shall supersede the standard pre-set provision to the extent of such conflict or discrepancy. This Agreement, including any Schedule attached hereto, shall constitute the entire Agreement between Landlord and Tenant. There is no representation, warranty, collateral agreement or condition, which affects this Agreement other than as expressed herein. This Agreement shall be read with all changes of gender or number required by the context.

18. **CONSUMER REPORTS: The Tenant is hereby notified that a consumer report containing credit and/or personal information may be referred to in connection with this transaction.**

INITIALS OF TENANT(S): [initials] **INITIALS OF LANDLORD(S):** [initials]

19. BINDING AGREEMENT: This Agreement and acceptance thereof shall constitute a binding agreement by the parties to enter into the Lease of the Premises and to abide by the terms and conditions herein contained.

SIGNED, SEALED AND DELIVERED in the presence of: IN WITNESS whereof I have hereunto set my hand and seal.

(Witness) (Tenant or Authorized Representative) (Seal) DATE

(Witness) (Tenant or Authorized Representative) (Seal) DATE

(Witness) (Guarantor) (Seal) DATE

We/I the Landlord hereby accept the above offer, and agree that the commission together with applicable HST (and any other tax as may hereafter be applicable) may be deducted from the deposit and further agree to pay any remaining balance of commission forthwith.

SIGNED, SEALED AND DELIVERED in the presence of: IN WITNESS whereof I have hereunto set my hand and seal:

(Witness) (Landlord or Authorized Representative) (Seal) DATE

(Witness) (Landlord or Authorized Representative) (Seal) DATE

CONFIRMATION OF ACCEPTANCE: Notwithstanding anything contained herein to the contrary, I confirm this Agreement with all changes both typed and written was finally accepted by all parties at ..... a.m./p.m. this ..... day of ....., 20.....

(Signature of Landlord or Tenant)

INFORMATION ON BROKERAGE(S)

Listing Brokerage West-100 Metro View Realty LTD., Brokerage Tel No. 905-238-8336

Omar Kamran Shaath & Simon Mahdessian
(Salesperson / Broker Name)

Co-op/Buyer Brokerage RE/MAX PREMIER INC. Tel No. (416) 987-8000

Stefan Solomun
(Salesperson / Broker Name)

ACKNOWLEDGEMENT

I acknowledge receipt of my signed copy of this accepted Agreement of Lease and I authorize the Brokerage to forward a copy to my lawyer.

(Landlord) DATE

(Landlord) DATE

Address for Service .....

..... Tel.No. .....

Landlord's Lawyer .....

Address .....

Email .....

....
Tel.No. FAX No.

I acknowledge receipt of my signed copy of this accepted Agreement of Lease and I authorize the Brokerage to forward a copy to my lawyer.

(Tenant) DATE

(Tenant) DATE

Address for Service .....

..... Tel.No. .....

Tenant's Lawyer .....

Address .....

Email .....

....
Tel.No. FAX No.

FOR OFFICE USE ONLY

COMMISSION TRUST AGREEMENT

To: Co-operating Brokerage shown on the foregoing Agreement to Lease:

In consideration for the Co-operating Brokerage procuring the foregoing Agreement to Lease, I hereby declare that all moneys received or receivable by me in connection with the Transaction as contemplated in the MLS Rules and Regulations of my Real Estate Board shall be received and held in trust. This agreement shall constitute a Commission Trust Agreement as defined in the MLS Rules and shall be subject to and governed by the MLS Rules pertaining to Commission Trust.

DATED as of the date and time of the acceptance of the foregoing Agreement to Lease.

Acknowledged

(Authorized to bind the Listing Brokerage) (Authorized to bind the Co-operating Brokerage)

OREA Ontario Real Estate Association

Form 400
for use in the Province of Ontario

Schedule A
Agreement to Lease - Residential

Toronto Real Estate Board

This Schedule is attached to and forms part of the Agreement to Lease between:

TENANT (Lessee), Shakil A. Khan ..... and

LANDLORD (Lessor), Samer Hendawi .....

for the lease of #1702-4011 Brickstone Mews, Mississauga, Ontario L5B 0K7 .....

..... dated the 24 day of April, 20 17

Tenant and Landlord agree that an accepted Agreement to Lease shall form a completed lease and no other lease will be signed between the Parties.

Landlord represents and warrants that the appliances as listed in this Agreement to Lease will be in good working order at the commencement of the lease term. Tenant agrees to maintain said appliances in a state of ordinary cleanliness at the Tenant's cost. Stainless Steel Fridge, Stove, Built in Dishwasher, Microwave, hood fan, Washer and Dryer.

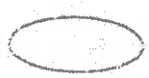
Landlord shall pay Real Estate taxes, maintain fire/liability insurance on the premises. Tenant acknowledges the Landlord's insurance on the premises provides no coverage on Tenant's personal property.

Tenant agrees to pay the first $50.00 of all repairs and the full cost of all repairs required, by the Tenant's wilful or negligent behaviour, otherwise, the Landlord will be responsible for the cost of all repairs over $50.00 caused by unwilful damage.

The Tenant shall be responsible for the payment of the following: Contents Insurance, Hydro, Cable/Internet/Phone (If applicable).

This form must be initialled by all parties to the Agreement to Lease.

INITIALS OF TENANT(S): 

INITIALS OF LANDLORD(S): 

Schedule A
Agreement to Lease - Residential

This Schedule is attached to and forms part of the Agreement to Lease between:

TENANT (Lessee), Shakil A. Khan ..... and

LANDLORD (Lessor), Samer Herdawi .....

for the lease of #1702-4011 Brickstone Mews, Mississauga, Ontario L5B 0K7 .....

..... dated the 24 day of April, 20 17

The Tenant agrees not to paint or wallpaper or decorate or alter any part of the demised premises without the prior written consent of the Landlord, which consent shall not be unreasonably withheld.

Tenant agrees to give the Landlord prompt and immediate written notice in the event of any accident or emergency affecting the plumbing, gas, heat or electrical system service the premises. The Tenant shall not hire any trades persons, or contractors, to do any work on the premises without the prior written consent of the Landlord.

Tenant agrees to keep no pets of any kind on the premises for the duration of the lease without prior written consent of the Landlord.

Tenant covenants with the Landlord, upon the termination of this lease pursuant to the terms of the Residential Tenancies Act, to deliver possession of the premises to the Landlord or his/her agent, and further to surrender all keys or entrance devices relating to the premises, mailbox keys.

Tenant shall pay $50.00 service charge for each NSF or returned cheque.

The Tenant Agrees to Pay as Deposit First & Last Month rent as deposit. The Tenant also agrees to pay in advance one aditional month.

OREA Ontario Real Estate Association

Form 320
for use in the Province of Ontario

Confirmation of Co-operation and Representation

Toronto Real Estate Board

BUYER: Shakil A. Khan

SELLER: Samer Hendawi

For the transaction on the property known as: #1702-4011 Brickstone Mews, Mississauga

For the purposes of this Confirmation of Co-operation and Representation, "Seller" includes a vendor, a landlord, or a prospective seller, vendor or landlord and "Buyer" includes a purchaser, a tenant, or a prospective buyer, purchaser or tenant, "sale" includes a lease, and "Agreement of Purchase and Sale" includes an Agreement to Lease.

The following information is confirmed by the undersigned salesperson/broker representatives of the Brokerage(s). If a Co-operating Brokerage is involved in the transaction, the brokerages agree to co-operate, in consideration of, and on the terms and conditions as set out below.

DECLARATION OF INSURANCE: The undersigned salesperson/broker representative(s) of the Brokerage(s) hereby declare that he/she is insured as required by the Real Estate and Business Brokers Act, 2002 (REBBA 2002) and Regulations.

1. LISTING BROKERAGE

a) ☒ The Listing Brokerage represents the interests of the Seller in this transaction. It is further understood and agreed that:

1) ☒ The Listing Brokerage is not representing or providing Customer Service to the Buyer.
(If the Buyer is working with a Co-operating Brokerage, Section 3 is to be completed by Co-operating Brokerage)

2) ☐ The Listing Brokerage is providing Customer Service to the Buyer.

b) ☐ **MULTIPLE REPRESENTATION:** The Listing Brokerage has entered into a Buyer Representation Agreement with the Buyer and represents the interests of the Seller and the Buyer, with their consent, for this transaction. The Listing Brokerage must be impartial and equally protect the interests of the Seller and the Buyer in this transaction. The Listing Brokerage has a duty of full disclosure to both the Seller and the Buyer, including a requirement to disclose all factual information about the property known to the Listing Brokerage. However, the Listing Brokerage shall not disclose:

- That the Seller may or will accept less than the listed price, unless otherwise instructed in writing by the Seller;
- That the Buyer may or will pay more than the offered price, unless otherwise instructed in writing by the Buyer;
- The motivation of or personal information about the Seller or Buyer, unless otherwise instructed in writing by the party to which the information applies, or unless failure to disclose would constitute fraudulent, unlawful or unethical practice;
- The price the Buyer should offer or the price the Seller should accept;
- And, the Listing Brokerage shall not disclose to the Buyer the terms of any other offer.

However, it is understood that factual market information about comparable properties and information known to the Listing Brokerage concerning potential uses for the property will be disclosed to both Seller and Buyer to assist them to come to their own conclusions.

Additional comments and/or disclosures by Listing Brokerage: (e.g. The Listing Brokerage represents more than one Buyer offering on this property.)

2. PROPERTY SOLD BY BUYER BROKERAGE – PROPERTY NOT LISTED

☐ The Brokerage ..... (does/does not) represent the Buyer and the property is not listed with any real estate brokerage. The Brokerage will be paid

☐ by the Seller in accordance with a Seller Customer Service Agreement

or: ☐ by the Buyer directly

Additional comments and/or disclosures by Buyer Brokerage: (e.g. The Buyer Brokerage represents more than one Buyer offering on this property.)

INITIALS OF BUYER(S)/SELLER(S)/BROKERAGE REPRESENTATIVE(S) (Where applicable)

BUYER | CO-OPERATING/BUYER BROKERAGE | SELLER | LISTING BROKERAGE

WEBForms® Dec/2015

3. Co-operating Brokerage completes Section 3 and Listing Brokerage completes Section 1.

CO-OPERATING BROKERAGE- REPRESENTATION:

a) [X] The Co-operating Brokerage represents the interests of the Buyer in this transaction.
b) [ ] The Co-operating Brokerage is providing Customer Service to the Buyer in this transaction.
c) [ ] The Co-operating Brokerage is not representing the Buyer and has not entered into an agreement to provide customer service(s) to the Buyer.

CO-OPERATING BROKERAGE- COMMISSION:

a) [X] The Listing Brokerage will pay the Co-operating Brokerage the commission as indicated in the MLS® information for the property
One Half Of One Month's rent + HST ..... to be paid from the amount paid by the Seller to the Listing Brokerage.
(Commission As Indicated in MLS® Information)

b) [ ] The Co-operating Brokerage will be paid as follows:

Additional comments and/or disclosures by Co-operating Brokerage: (e.g., The Co-operating Brokerage represents more than one Buyer offering on this property.)

Commission will be payable as described above, plus applicable taxes.

COMMISSION TRUST AGREEMENT: If the above Co-operating Brokerage is receiving payment of commission from the Listing Brokerage, then the agreement between Listing Brokerage and Co-operating Brokerage further includes a Commission Trust Agreement, the consideration for which is the Co-operating Brokerage procuring an offer for a trade of the property, acceptable to the Seller. The Commission Trust Agreement shall be subject to and governed by the MLS® rules and regulations pertaining to commission trusts of the Listing Brokerage's local real estate board, if the local board's MLS® rules and regulations so provide. Otherwise, the provisions of the OREA recommended MLS® rules and regulations shall apply to the Commission Trust Agreement. For the purpose of this Commission Trust Agreement, the Commission Trust Amount shall be the amount noted in Section 2 above. The Listing Brokerage hereby declares that all monies received in connection with the trade shall constitute a Commission Trust and shall be held, in trust, for the Co-operating Brokerage under the terms of the applicable MLS® rules and regulations.

SIGNED BY THE BROKER/SALESPERSON REPRESENTATIVE(S) OF THE BROKERAGE(S) (Where applicable)

RE/MAX PREMIER INC.	West-100 Metro View Realty LTD., Brokerage
(Name of Co-operating/Buyer Brokerage)	(Name of Listing Brokerage)
9100 JANE ST BLDG L #77 VAUGHAN	129 Fairview Road West Mississauga
Tel.: (416) 987-8000 Fax: (416) 987-8001	Tel.: 905-238-8336 Fax: 905-238-0020
Stefan Solomun Date: Apr. 24. 2017	Date:
(Authorized to bind the Co-operating/Buyer Brokerage)	(Authorized to bind the Listing Brokerage)
Stefan Solomun	Omar Kanaan Shaath & Simon Mahdessian
(Print Name of Broker/Salesperson Representative of the Brokerage)	(Print Name of Broker/Salesperson Representative of the Brokerage)

CONSENT FOR MULTIPLE REPRESENTATION (To be completed only if the Brokerage represents more than one client for the transaction)

The Buyer/Seller consent with their initials to their Brokerage representing more than one client for this transaction.

BUYER'S INITIALS SELLER'S INITIALS

ACKNOWLEDGEMENT

I have received, read, and understand the above information.

(Signature of Buyer) Date: Apr. 24. 17 (Signature of Seller) Date:

(Signature of Buyer) Date: (Signature of Seller) Date:

squareone insurance

Confirmation of tenant insurance

This document is issued for information only and is certified to be accurate as at the date issued. It confers no rights and imposes no liability on the insurer. The policy is subject to terms, conditions and exclusions, and is subject to the standard mortgage clause. This document does not amend, extend or alter the coverage provided by the policy. E.&O.E.

Date issued:	April 25, 2017
Agency:	Square One Insurance Services Inc. Suite 1218 - 650 West Georgia Street Vancouver, British Columbia V6B 4N8
Insurer:	The Mutual Fire Insurance Company of British Columbia Suite 201 - 9366 200A Street Langley, British Columbia V1M 4B3
Policy #:	593340
Insured(s):	Caitlind Thompson
Insured location:	2708 - 4011 BRICKSTONE Mews MISSISSAUGA, Ontario L5B0J7
Insured Location Use:	Occupied Property
Effective date and time:	April 28, 2017 12:01 AM local time
Expiry date:	Valid until April 28, 2018 unless cancelled.
Personal liability limit:	$1,000,000
Deductibles:	Earthquake $2,500 Standard $1,000

For questions about this confirmation of insurance, please call **1.855.331.6933** and **press 1** for policy sales and service.

Regards,
Square One Insurance Services Inc.

Daniel Mirkovic

Suite 1218, PO Box 11600
650 West Georgia Street
Vancouver, BC V6B 4N8

Tel 1.855.331.6933
Fax 1.855.331.6935
squareoneinsurance.ca

OREA Ontario Real Estate Association

Form 410
for use in the Province of Ontario

Rental Application
Residential

Toronto Real Estate Board

I/We hereby make application to rent #1702-4011 Brickstone Mews, Mississauga, O

from the 1 day of May 20 17 at a monthly rental of $ 1,975.00

to become due and payable in advance on the 1st day of each and every month during my tenancy.

1. **Name** Shakil A. Khan Date of birth 1952/12/08 SIN No. (Optional)

Drivers License No. K3175-72345-21208 Occupation Full Time Truck Driver

2. **Name** Date of birth SIN No. (Optional)

Drivers License No Occupation

3. **Other Occupants:** Name Tahir Khan (collateral) Relationship Son Age 39

Name Relationship Age

Name Relationship Age

Do you have any pets? NO If so, describe

Why are you vacating your present place of residence? Too Far (Bolton)

LAST TWO PLACES OF RESIDENCE

Address 9194 Castledene Sideroad Caledon, Ontario L7E 0S2

From 06/11/2015 To Present

Name of landlord Shahid Khan

Telephone: 905-857-3995

Address # 1201-3590 Kaneff Drive Mississauga, ON

From OWNED To SOLD

Name of Landlord

Telephone:

PRESENT EMPLOYMENT

Employer Reliable Staffing Services

Business address #13-1365 Midway Blvd, Mississauga, ON

Business telephone 416-675-1456

Position held Full-Time Truck Driver

Length of employment ~ 1 year

Name of supervisor Dharmesh Mehta

Current salary range: Monthly $ 4000.00

PRIOR EMPLOYMENT

1.

1.

1.

1.

1.

Son's

SPOUSE'S PRESENT EMPLOYMENT

Employer: A1 Spray Foam Insulation

Business address: 11 Steinway Blvd, Etobicoke, on

Business telephone: 416-674-4009

Position held: Sprayer

Length of employment: 1 Year

Name of supervisor: Shahid Khan

Current salary range: Monthly $: 4800.00

PRIOR EMPLOYMENT

1.

2.

3.

4.

5.

Name of Bank ..... Branch ..... Address .....

Chequing Account # ..... Savings Account # .....

FINANCIAL OBLIGATIONS

Payments to ..... Amount: $ .....

Payments to ..... Amount: $ .....

PERSONAL REFERENCES

Name: Rohit Kapai Address: 8 Samsung Trail, Maleton, on

Telephone: 289-938-8057 Length of Acquaintance: 17 years Occupation: Director At CP Rail

Name ..... Address .....

Telephone: ..... Length of Acquaintance ..... Occupation .....

AUTOMOBILE(S)

Make: Hyundai Sonata Model: Sonata Year: 2014 Licence No: BLCS-736

Make ..... Model ..... Year ..... Licence No .....

The Applicant consents to the collection, use and disclosure of the Applicant's personal information by the Landlord and/or agent of the Landlord, from time to time, for the purpose of determining the creditworthiness of the Applicant for the leasing, selling or financing of the premises or the real property, or making such other use of the personal information as the Landlord and/or agent of the Landlord deems appropriate.

The Applicant represents that all statements made above are true and correct. **The Applicant is hereby notified that a consumer report containing credit and/or personal information may be referred to in connection with this rental.** The Applicant authorizes the verification of the information contained in this application and information obtained from personal references. This application is not a Rental or Lease Agreement. In the event that this application is not accepted, any deposit submitted by the Applicant shall be returned.

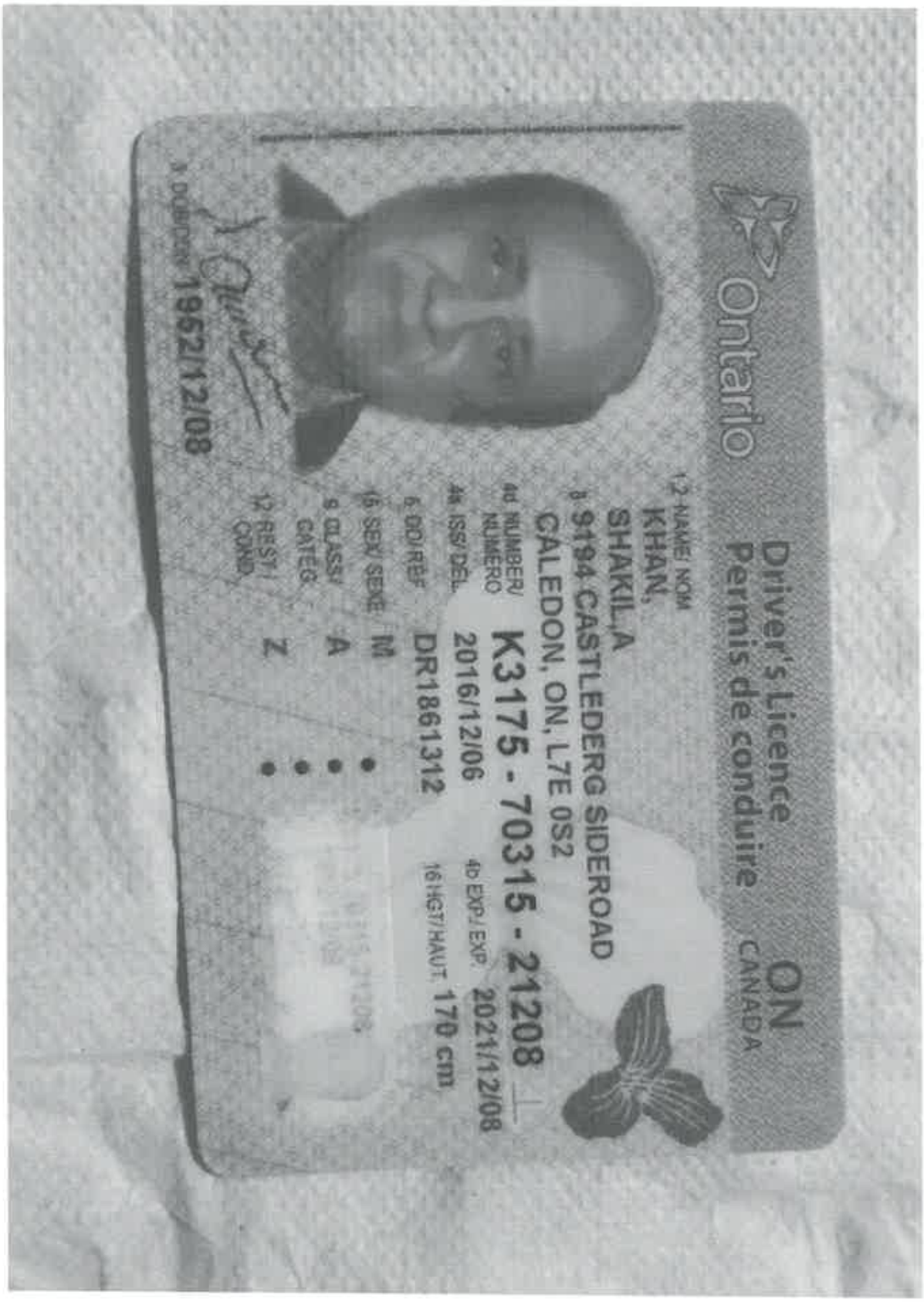
Signature of Applicant: [signature] Date: Apr. 29. 2017

Telephone: 416-831-7867

Signature of Applicant: [signature] Date: Apr. 29. 2017

Telephone: 416-371-4009

PSV # 1702


Ontario
Driver's Licence
Permis de conduire
ON
CANADA
1,2 NAME/ NOM
KHAN,
SHAKIL,A
8 9194 CASTLEDERG SIDEROAD
CALEDON, ON, L7E 0S2
4d NUMBER/ NUMÉRO K3175 - 70315 - 21208
4a ISS/ DÉL. 2016/12/06
4b EXP/ EXP. 2021/12/08
5 DD/ REF DR1861312
16 HGT/ HAUT. 170 cm
15 SEX/ SEXE M
9 CLASS/ CATÉG. A
12 REST/ COND. Z
3 DOB/ DDN 1952/12/08

WEST-100 METRO VIEW REALTY

129 Fairview Rd. W. Mississauga, Ontario L5B1K7
O: 905-238-8336 F: 905-238-0020

DEPOSIT RECEIPT

DATE: April 25, 2017

RECEIVED FROM: Stefan Solomun

PAYMENT METHOD: RBC Bank Draft

DEPOSIT AMOUNT: $5925.00 (first and last two months)

PROPERTY: 1702-4011 Brickstone Mews

Thank-you,

West-100 Metro View Realty Ltd., Brokerage

58245554 9-516

Royal Bank of Canada
Banque Royale du Canada
12812 HWY 50
BOLTON, ON

DATE 20170425 (Y/A M/M D/J)

PAY TO THE ORDER OF / PAYEZ À L'ORDRE DE West-100 Metro View Realty ltd Brokerage In trust $5,925.00

EXACTLY 00126 $5,925.00 ¢

AUTHORIZED SIGNATURE REQUIRED FOR AMOUNTS OVER $5,000.00 CANADIAN / SIGNATURE AUTORISÉE REQUISE POUR UN MONTANT EXCÉDANT 5,000.00 $ CANADIENS

CANADIAN DOLLARS CANADIENS

RE/OBJET

PURCHASER NAME / NOM DE L'ACHETEUR

PURCHASER ADDRESS / ADRESSE DE L'ACHETEUR

AUTHORIZED SIGNATURE / SIGNATURE AUTORISÉE

COUNTERSIGNED / CONTRESIGNÉ Angela Medeiros

FORM 1859 (06-2010)

⑈58245554⑈ ⑆00126⑈003⑆ 099⑈013⑈5⑈

A1 SPRAY FOAM INSULATION

Date: March 21, 2017

RE: TAHIR KHAN

To whom it may concern,

Please be advised that Mr. Tahir Khan is currently employed at A1 Spray Foam Insulation since February 2015.

Mr. Khan holds the position of Sprayer in our company on full-time basis and working 40 hours per week.

We are currently paying him $30.00 per hour on weekly basis.

If you have any further questions or requirements, please feel free to contact me at 416-871-4009.

Shahid Khan

Shahid Khan
Director

Website: [redacted] • Email: [redacted] • Tel: 416 871 4009

A1 SPRAY FOAM
11 STEINWAY BLVD
UNIT-12
ETOBICOKE, ON M9W6S9

Tahir Khan
3590 Kaneff Court Apt # 1201
Mississauga, ON L5A 3X3

Employee Payslip Cheque number 68 Pay Period: 2017-03-26 - 2017-09-31 Cheque Date: 2017-04-06

Employee

Tahir Khan, 3590 Kaneff Court Apt # 1201, Mississauga, ON L5A 3X3

Earnings and Hours	Qty	Rate	Current	YTD Amount
HOURLY	40.00	30.00	1,200.00	15,600.00

Withholdings	Current	YTD Amount
CPP - Employee	-56.07	-728.91
EI - Employee	-19.56	-254.28
Federal Income Tax	-225.36	-2,930.28
	-301.19	-3,913.47

Net Pay		
	898.81	11,684.53

RELIABLE STAFFING SERVICES

13-1365 MID-WAY BLVD, MISSISSAUGA ON L5T 2J5 Ph No-416-675-1458

To Whom It May Concern,

RE. MR. Shakil Khan
9194 Castle Derg Side Road
Caledon, ON L7E 0S2

This is to certify that Mr. SHAKIL KHAN is working with us as a Driver on full time basis since July 2015.

We are currently paying him $24.00 per hour and he works 40 hours a week.

If you have any question please call the undersigned.

Regards,

DHARMESH MEHTA
DIRECTOR
March 20, 2017

RELIABLE STAFFING SERVICES
13-1366 MIDWAY BLVD
MISSISSAUGA ON L5T 2J5
(416) 675-1458

Earnings Statement

Period Beginning	March 25,2017
Period Ending	March 31,2017
Pay date	April 05,2017
Cheque No	7996

Shakil Khan
2184 Castle Derg Side Road
Caledon On L7E 0S2

Earnings	rate	hours	this period	year to date
Regular	24.00	40.00	960.00	24,000.00
	Gross Pay		960.00	24,000.00
Deductions	Statutory			
	Taxes		153.52	4,140.51
	EI		19.35	391.55
	CPP		44.13	1,112.32
	Total		216.35	5,644.38
	Net Pay		744.64	18,355.62

EQUIFAX

Print This Page | Close Window

Equifax Credit Report and Score ™ as of 03/16/2017

Name: Shakil Ahmad Khan

Confirmation Number: 0812224509

Credit Score Summary

654 | Fair

Where You Stand

The Equifax Credit Score™ ranges from 300-900. Higher scores are viewed more favorably. Your Equifax credit score is calculated from the information in your Equifax Credit Report. Most lenders would consider your score fair. You may have challenges qualifying for credit and you may expect to pay high interest rates when you do qualify.

		EFX			
Range	300 - 559 Poor	560 - 659 Fair	660 - 724 Good	725 - 759 Very Good	760 + Excellent
Canada Population	4%	10%	15%	14%	57%

What's Impacting Your Score

Below are the aspects of your credit profile and history that are important to your Equifax credit score. They are listed in order of impact to your score - the first has the largest impact, and the last has the least.

Collections Balance.

Number of always satisfactory bank installment trades.

Number collections with collection amount > $250.

Your Loan Risk Rating

654 | Fair

Your credit score of 654 is better than 13% of Canadian consumers.

The Equifax Credit Score ™ ranges from 300-900. Higher scores are viewed more favorably.

The Bottom Line :

Lenders consider many factors in addition to your score when making credit decisions. However, most lenders would consider you to be a high risk. You may have difficulty qualifying for conventional loans and credit cards - and when you do qualify for credit, you may be charged high interest rates. If you're in the market for credit, this is what you might expect:

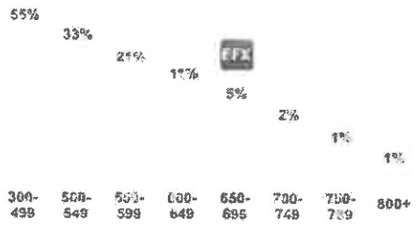
You may have difficulty qualifying for credit cards.

When you do qualify for a loan, you may pay very high interest rates.

The loan terms you receive may be very restrictive and include low credit limits.

It is important to understand that your credit score is not the only factor that lenders evaluate when making credit decisions. Different lenders set their own policies and tolerance for risk, and may consider other elements, such as your income, when analyzing your creditworthiness for a particular loan.

Delinquency Rates*



* Delinquency Rate is defined as the percentage of borrowers who reach 90 days past due or worse (such as bankruptcy or account charge-off) on any credit account over a two year period.

CREDIT REPORT

Personal Information

Personal Data

Name:	SHAKIL AHMAD KHAN
SIN:	484XXX058
Date of Birth:	1953-12-XX

Other Names:

Also Known as:	SHAKIL KHNA

Current Address

Address:	9194 CASTLEBERG BOLTON, ON
Date Reported:	2015-02 2007-02 2007-08

Previous Address

Address:	3580 KANEFF CRES UNIT 1201 MISSISSAUGA, ON
Date Reported:	2015-02 2007-02 2007-08

Current Employment

Employer:	MORNEAU TRANSPORT
Occupation:	

Previous Employment

Employer:	CANADA CARTAGE
Occupation:	
Employer:	GLOBAL TRADE PARTNERS INC
Occupation:	LOGISTICS

Special Services

No Special Services Message

Consumer Statement

No Consumer Statement on File

Credit Information

This section contains information on each account that you've opened in the past. It is retained in our database for not more than 6 years from the date of last activity.

An installment loan is a fixed-payment loan in which the monthly payment does not change from month to month. Examples of such loans are a car loan or a student loan. Mortgage information may appear in your credit report, but is not used to calculate your credit score. A revolving loan is a loan in which the balance or amount owed changes from month to month, such as a credit card.

Note: The account numbers have been partially masked for your security.

CITI CARDS HOME DEP

Phone Number:	(800)333-5557	High Credit/Credit Limit:	$2,000.00
Account Number:	XXX... 388	Payment Amount:	$4.00
Association to Account:	Individual	Balance:	$4.00
Type of Account:	Revolving	Past Due:	$0.00
Date Opened:	2017-01	Date of Last Activity:	
Status:	Paid as agreed and up to date	Date Reported:	2017-03
Months Reviewed:	03		
Payment History:	No payment 30 days late No payment 60 days late No payment 90 days late		
Prior Paying History:			
Comments:	Monthly payments Amount in h/c column is credit limit		

TD AUTO FINANCE CAN

Phone Number:	(800)633-3001	High Credit/Credit Limit:	$2,000.00
Account Number:	XXX...537	Payment Amount:	Not Available
Association to Account:	Individual	Balance:	$0.00
Type of Account:	Revolving	Past Due:	$0.00
Date Opened:	2011-01	Date of Last Activity:	2015-04
Status:	Paid as agreed and up to date	Date Reported:	2017-02
Months Reviewed:	72		
Payment History:	No payment 30 days late No payment 60 days late No payment 90 days late		
Prior Paying History:			
Comments:	Personal line of credit Monthly payments		

INFINITE AVION

Phone Number:	Not Available	High Credit/Credit Limit:	$5,500.00
Account Number:	XXX...167	Payment Amount:	$10.00
Association to Account:	Individual	Balance:	$36.00
Type of Account:	Revolving	Past Due:	$0.00
Date Opened:	2003-06	Date of Last Activity:	2017-02
Status:	Paid as agreed and up to date	Date Reported:	2017-03
Months Reviewed:	43		
Payment History:	No payment 30 days late No payment 60 days late No payment 90 days late		
Prior Paying History:			
Comments:	Monthly payments Amount in h/c column is credit limit		

ROYAL BANK OF CANADA

Phone Number:	(800)769-2511	High Credit/Credit Limit:	$27,364.00
Account Number:	XXX...001	Payment Amount:	$185.00
Association to Account:	Individual	Balance:	$27,123.00
Type of Account:	Installment	Past Due:	$0.00
Date Opened:	2017-01	Date of Last Activity:	2017-02
Status:	Too new to rate or opened but not used	Date Reported:	2017-02
Months Reviewed:	02		
Payment History:	No payment 30 days late No payment 60 days late No payment 90 days late		
Prior Paying History:			
Comments:	Bi-weekly payments		

ROYAL BANK VISA

Phone Number:	Not Available	High Credit/Credit Limit:	$3,500.00
Account Number:	XXX...2835	Payment Amount:	Not Available
Association to Account:	Individual	Balance:	$0.00
Type of Account:	Revolving	Past Due:	$0.00
Date Opened:	2012-06	Date of Last Activity:	2017-02
Status:	Paid as agreed and up to date	Date Reported:	2017-02
Months Reviewed:	56		
Payment History:	No payment 30 days late No payment 60 days late No payment 90 days late		
Prior Paying History:			
Comments:	Monthly payments Amount in h/c column is credit limit		

CITI CARDS HOME DEP

Phone Number:	(800)733-9557	High Credit/Credit Limit:	$1,700.00
Account Number:	XXX...981	Payment Amount:	Not Available
Association to Account:	Individual	Balance:	$0.00
Type of Account:	Revolving	Past Due:	$0.00

Date Opened:	1999-04	Date of Last Activity:	2015-02
Status:	Paid as agreed and up to date	Date Reported:	2017-02
Months Reviewed:	72		
Payment History:	01 payments 30 days late 01 payments 60 days late 02 payments 90 days late		
Prior Paying History:	At least 120 days past due (2012-11) Three or more payments past due (2012-10) Two payments past due (2012-09)		
Comments:	Account Closed Monthly payments		

PRESIDENTS CHOICE MC

Phone Number:	(866)246-7262	High Credit/Credit Limit:	$1,000.00
Account Number:	XXX...297	Payment Amount:	Not Available
Association to Account:	Individual	Balance:	$0.00
Type of Account:	Revolving	Past Due:	Not Available
Date Opened:	2011-11	Date of Last Activity:	2014-12
Status:	Paid as agreed and up to date	Date Reported:	2016-10
Months Reviewed:	60		
Payment History:	03 payments 30 days late 01 payments 60 days late No payment 90 days late		
Prior Paying History:	One payment past due (2014-07) Two payments past due (2012-11) One payment past due (2012-10)		
Comments:	Closed by credit grantor Monthly payments		

TD AUTO FINANCE CAN

Phone Number:	(800)032-9321	High Credit/Credit Limit:	$3,215.00
Account Number:	XXX...006	Payment Amount:	$427.00
Association to Account:	Individual	Balance:	$0.00
Type of Account:	Instalment	Past Due:	$0.00
Date Opened:	2009-04	Date of Last Activity:	2016-03
Status:	Paid as agreed and up to date	Date Reported:	2016-03
Months Reviewed:	82		
Payment History:	No payment 30 days late No payment 60 days late No payment 90 days late		
Prior Paying History:			
Comments:	Account paid Auto		

ROYAL BANK VISA

Phone Number:	Not Available	High Credit/Credit Limit:	$3,500.00
Account Number:	XXX...652	Payment Amount:	$0.00
Association to Account:	Individual	Balance:	$0.00
Type of Account:	Revolving	Past Due:	$0.00
Date Opened:	2003-06	Date of Last Activity:	2013-06
Status:	Paid as agreed and up to date	Date Reported:	2015-09
Months Reviewed:	30		
Payment History:	No payment 30 days late No payment 60 days late No payment 90 days late		
Prior Paying History:			
Comments:	Monthly payments		

CDN WESTERN BANK

Phone Number:	(780)423-8888	High Credit/Credit Limit:	$175,000.00
Account Number:	XXX...TG1	Payment Amount:	$424.00
Association to Account:	Individual	Balance:	$0.00
Type of Account:	Mortgage	Past Due:	Not Available
Date Opened:	2013-12	Date of Last Activity:	2016-02
Status:	Paid as agreed and up to date	Date Reported:	2016-03
Months Reviewed:	38		
Payment History:	No payment 30 days late		

No payment 60 days late
No payment 90 days late

Prior Paying History:

Comments: Account paid
Mortgage

* This item is not displayed to all credit grantors. It does not impact your credit score as reported on this report; however some lenders may have a different score where it is factored in to the scoring algorithm.

ROGERS COMMUNICATION

Phone Number: (877)764-3772
Account Number: XXX...552
Association to Account: Individual
Type of Account: Open
Date Opened: 2012-03
Status: Bad debt, collection account or unable to locate
Months Reviewed:
Payment History: No payment 30 days late
No payment 60 days late
No payment 90 days late
Prior Paying History:
Comments: Closed at consumer request
Account paid

High Credit/Credit Limit:
Payment Amount: Not Available
Balance: $0.00
Past Due: Not Available
Date of Last Activity: 2014-03
Date Reported: 2015-03

HOME TRUST VISA

Phone Number: (877)903-2133
Account Number: XXX...997
Association to Account: Individual
Type of Account: Revolving
Date Opened: 2010-06
Status: Paid as agreed and up to date
Months Reviewed: 36
Payment History: No payment 30 days late
No payment 60 days late
No payment 90 days late
Prior Paying History:
Comments: Closed at consumer request
Account paid

High Credit/Credit Limit: $0.00
Payment Amount: Not Available
Balance: $0.00
Past Due: $0.00
Date of Last Activity: 2014-02
Date Reported: 2014-04

Credit History and Banking Information

A credit transaction will automatically purge from the system six (6) years from the date of last activity. All banking information (checking or saving account) will automatically purge from the system six (6) years from the date of registration.

No Banking information on file

Please contact Equifax for additional information on Deposit transactions at 1-800-465-3008

Public Records and Other Information

Bankruptcy

A bankruptcy automatically purges six (6) years from the date of discharge in the case of a single bankruptcy. If the consumer declares several bankruptcies, the system will keep each bankruptcy for fourteen (14) years from the date of each discharge. All accounts included in a bankruptcy remain on file indicating "included in bankruptcy" and will purge six (6) years from the date of last activity.

Voluntary Deposit - Orderly Payment Of Debts, Credit Counseling

When voluntary deposit – OPD – credit counseling is paid, it will automatically purge from the system three (3) years from the date paid.

Registered Consumer Proposal

When a registered consumer proposal is paid, it will automatically purge three (3) years from the date paid.

Judgments, Seizure Of Movable/Immovable, Garnishment Of Wages

The above will automatically purge from the system six (6) years from the date filed.

Secured Loans

A secured loan will automatically purge from the system six (6) years from the date filed.
(Exception: P.E.I. Public Records: seven (7) to ten (10) years.)

Secured Loans:
Court Name: MINISTRY GOVT SERV
Industry Class:
Date Filed: 2017-01
Creditor's Name and Amount: 724435749 ROYAL BANK OF CANADA
Maturity Date:
Comments: Security Deposit Unknown

Secured Loans:
Court Name: MINISTRY GOVT SERV
Industry Class:
Date Filed: 2014-04
Creditor's Name and Amount: 665028506 TD AUTO FINANCE (CANADA) INC 39215
Maturity Date:
Comments: Security Discharged

Collection Accounts

A collection account under public records will automatically purge from the system six (6) years from the date of last activity.

ALAM LAW OFFICE
Date Assigned: 2013-11
Collection Agency: DIXON COMM INV
Amount: $4,350.00
Date of Last Payment: 2011-08
Date Verified:
Comments:
Account Number: D915037BN1
Reason:
Balance Amount: $3,860.00
Date Paid:

Credit Inquiries to the File

The following inquiries were generated because the listed company requested a copy of your credit report. An inquiry made by a Creditor will automatically purge three (3) years from the date of the inquiry. The system will keep a minimum of five (5) inquiries.

2017-01-24 BMO 5296 (Phone Number Not Available)
2017-01-24 TD AUTO FINANCE CAN (800)832-3321
2017-01-24 VISA DESJARDINS (514)397-4789
2016-05-11 HOME TRUST COMPANY (877)903-2133
2014-12-13 TD AUTO FINANCE CAN (800)832-3321
2014-12-09 SCOTIABANK (416)263-1460
2014-12-08 SCOTIABANK (416)263-1460
2014-11-17 HONDA CANADA FINANCE (Phone Number Not Available)
2014-07-25 BELL CANADA (800)730-7121
2014-07-19 BELL CANADA (800)730-7121

The following "soft" inquiries were also generated. These soft inquiries do not appear when lenders look at your file, they are only displayed to you. All Equifax Personal Sol inquiries are logged internally, however only the most current is retained for each month.

2017-03-01 FIRSTREPORT RPRT (855)826-5328
2017-01-10 TDCT (905)722-3456
2016-05-25 AV FDR (800)663-0329

How can I correct an inaccuracy in my Equifax credit report?

Complete and submit a Consumer Credit Report Update Form to Equifax.

By mail:

Equifax Canada Co.
Consumer Relations Department
Box 190 Jean Talon Station

FSB GROUP LTD.

FSB INSURANCE LTD.
FSB COMMERCIAL LTD.
fsbgroup.ca

With Privacy Officer and Contact information included

Personal Information Consent Form

By signing below you are authorizing that we as your brokerage may collect, use or disclose your personal information contained on your application form and personal information that you have authorized that we may obtain though the application form for the Identified Purposes listed below. To achieve the Identified Purposes listed below, personal information may be shared with third parties such as insurers, government or industry agencies. If you are providing to us personal information about another individual, such as a family member, or in the case of a commercial client, information about an employee, agent, or representative, then you confirm that you have obtained authorization from them to consent to the above on their behalf. In accordance with our Ten Principles we collect, use and disclose your personal information to:

- Verify your identity;
- Determine your eligibility for and provide to you the insurance or financial products that you have requested;
- Assess and underwrite insurance and reinsurance risks;
- Provide investment or banking advice (where you have requested an investment or banking product);
- Determine prices, fees and premiums;
- Investigate and settle claims;
- Offer renewal coverage for your existing insurance policy;
- Detect and prevent fraud;
- Compile statistics, conduct market research and report to regulatory and industry agencies;
- Investigate specific transactions or patterns of transactions to detect unauthorized or illegal activities;
- Determine the suitability of your investments;
- Comply with the law; or
- Comply with tax requirements.

Personal information may be collected, used or disclosed for any of these "Identified Purposes" set out above. If your personal information is not needed for one of the Identified Purposes, we will not use or disclose it without obtaining additional consent from you.

Name of Client: Shakil A. Khan **Staff Signature:** _____

Client Signature: _____ **Date:** APR 25, 17

Client Signature: _____ **Date:** _____

*If a customer refuses to provide consent for the Identified Purposes listed above, this may limit the ability in whole or on part to offer to them the product or service they have requested.

In addition, by initialing below, you expressly authorize that we use the personal information described above for the additional Identified Purpose of determining your eligibility for and offering to you other insurance or financial products by members of this brokerage.

- Property and casualty insurance;
- Life insurance;
- Segregated funds;
- Mutual funds;
- Banking products or
- other insurance or financial products which may be of interest to you from us or insurers, financial service representatives and other entities with whom we have strategic alliance

Client Initials: SAK

A fee may be exchanged between financial service providers for the referral of your name to such third party. For further information about our policies and practices, to access personal information in our custody or under our control or to file a complaint, please contact our Privacy Officer.

HABITATIONAL INSURANCE APPLICATION

BILLING METHOD: COMPANY BILL

INSURANCE COMPANY		BINDER NUMBER	POLICY NUMBER
Wawanesa Mutual Insurance Co.	☐ QUOTE ☒ NEW ☐ RENEWAL	56303	56303

1. APPLICANT'S FULL NAME AND POSTAL ADDRESS

NAME: Khan, Shakil

ADDRESS: 1702 - 4011 BRICKSTONE MEWS

CITY PROV: MISSISSAUGA POSTAL CODE: L5B 0J7

CONTACT NAME:

HOME: CELL:

BUSINESS: FAX:

EMAIL:

WEBSITE:

PREFERRED LANGUAGE: ☒ ENGLISH ☐ FRENCH

2. BROKER'S NAME AND POSTAL ADDRESS

NAME: FSB INSURANCE LTD.

ADDRESS: 385 Connie Crescent

CITY PROV: Concord Ontario POSTAL CODE: L4K 5R2

CONTACT NAME:

BUSINESS: (905) 731-5177 CELL:

EMAIL:

BROKER CONTRACT NO: 7513 BROKER SUB-CONTRACT NO.:

BROKER CLIENT ID: 49584 COMPANY CLIENT ID:

GROUP NAME: GROUP ID:

3. POLICY PERIOD

EFFECTIVE DATE: 2017 5 1 TIME: 12:01 A.M. ☒ P.M. ☐ EXPIRY DATE: 2018 5 1 AT 12:01 A.M.

ALL TIMES ARE LOCAL TIMES AT THE APPLICANT'S ADDRESS SHOWN ABOVE.

4. APPLICANT DATA

APPLICANT 1 NAME: Khan, Shakil	APPLICANT 2 NAME:
OCCUPATION: YEARS CONTINUOUSLY EMPLOYED:	OCCUPATION: YEARS CONTINUOUSLY EMPLOYED:
DATE OF BIRTH: 1952 8 12	DATE OF BIRTH:

5. LOSS HISTORY

CLAIMS HISTORY REPORT DATE:

HAVE THERE BEEN ANY LOSSES OR CLAIMS BY THE APPLICANT IN THE PAST 5 YEARS? ☐ YES ☒ NO IF YES, COMPLETE THE TABLE BELOW

DATE OF LOSS	LOC #	CAUSE OF LOSS	STATUS	AMOUNT PAID	INSURANCE COMPANY	POLICY NUMBER

DOES THE APPLICANT HAVE ANY KNOWLEDGE OR INFORMATION OF ANY FACT, CIRCUMSTANCE, OR SITUATION WHICH COULD REASONABLY GIVE RISE TO A CLAIM WHICH WOULD FALL WITHIN THE SCOPE OF THE PROPOSED INSURANCE? ☐ YES ☒ NO IF YES, PROVIDE DETAILS IN REMARKS SECTION.

6. POLICY HISTORY

CONTINUOUSLY INSURED SINCE:

☒ FIRST TIME INSURED, NO PRIOR HABITATIONAL INSURANCE

INSURANCE COMPANY	POLICY NUMBER	EFFECTIVE DATE	END DATE	REASON FOR ENDING	IF TERMINATED BY INSURER, REASON
No Previous Insurer					

IN THE PAST FIVE YEARS, HAS ANY INSURANCE COMPANY DECLINED, CANCELLED, REFUSED OR INDICATED AN INTENT NOT TO RENEW ANY HABITATIONAL INSURANCE POLICY? ☐ YES ☒ NO IF YES, PROVIDE DETAILS IN REMARKS SECTION

7. CROSS REFERENCE INFORMATION

LIST OTHER POLICIES WITH THIS INSURANCE COMPANY

LINE OF BUSINESS: _____ POLICY NUMBER: _____

LINE OF BUSINESS: _____ POLICY NUMBER: _____

LINE OF BUSINESS: _____ POLICY NUMBER: _____

LINE OF BUSINESS: _____ POLICY NUMBER: _____

CSIO HABITATIONAL INSURANCE APPLICATION

UNDERWRITING INFORMATION LOC NO. 1

PREMIUM TABLE
TOWN ID CODE
NO OF ATTACHMENTS

8. RISK ADDRESS ☐ SAME AS POSTAL ADDRESS

ADDRESS 1702 -4011 BRICKSTONE MEWS | CITY, PROV MISSISSAUGA ON | POSTAL CODE L5B 0J7

9. RATING INFORMATION

YEAR BUILT 2016 | NO. OF STORY'S High | NO. OF FAMILIES 1 | # OF UNITS | TOTAL LIVING AREA (excluding basement) 700 ☒ sq ft ☐ m² | ACCESS TYPE EASY ACCESS ROAD | SMOKERS? N

REPLACEMENT COST EVALUATOR PRODUCT | DATE EVALUATION COMPLETED | DATE OF BIRTH OF ELDEST OCCUPANT 1962 8 12 | RELATIONSHIP TO APPLICANT Insured

OCCUPANCY TYPE Primary Residence

STRUCTURE TYPE High Rise

FOUNDATION TYPE Concrete Blocks

FINISHED BASEMENT ____ %

EXTERIOR WALL FRAMING TYPE Other (Attach a

EXTERIOR WALL FINISH TYPE Cement

INTERIOR WALL CONSTRUCTION TYPE

____ % ____ %

____ % ____ %

INTERIOR WALL HEIGHT

____ % ____ % ____ %

INTERIOR FLOOR FINISH TYPE

____ % ____ %

____ % ____ %

CEILING CONSTRUCTION TYPE

____ % ____ %

____ % ____ %

UPGRADES	FULL(YY)	PARTIAL(YY)
ROOF		2016
ELECTRICAL		2016
HEATING		2016
PLUMBING		2016

ROOF COVERING TYPE Tar & Gravel

ELECTRICAL WIRING TYPE Copper

ELECTRICAL PANEL TYPE Breakers

SERVICE 100 A

PRIMARY HEATING TYPE

APPARATUS Furnace (Central)

FUEL Natural Gas

LOCATION Main Floor

PROFESSIONALLY INSTALLED? ☒ YES ☐ NO

APPROVED BY ULC, CSA, OR WH? ☒ YES ☐ NO

AUXILIARY HEATING TYPE

APPARATUS None

FUEL

LOCATION

PROFESSIONALLY INSTALLED? ☐ YES ☐ NO

APPROVED BY ULC, CSA, OR WH? ☐ YES ☐ NO

NO OF FACE CORDS PER YEAR

☐ SOLID FUEL HEATING QUESTIONNAIRE ATTACHED

RADIANT HEATING AREA ☐ sq ft ☐ m²

MAKE YEAR

OIL TANK YEAR ☐ INSIDE ☐ IN GROUND ☐ OUTSIDE ☐ ABOVE GROUND

☐ FUEL TANK QUESTIONNAIRE ATTACHED

PLUMBING TYPE

COPPER	100 %	GALVANIZED	%
ABS	%	PVC	%
PEX	%	POLY-B	%
LEAD	%	OTHER	%
		PLASTIC	%

WATER HEATER TYPE

APPARATUS Heat Pump

WATER HEATER YEAR 2016

FUEL Natural Gas

PROFESSIONALLY INSTALLED? ☒ YES ☐ NO

APPROVED BY ULC, CSA, OR WH? ☒ YES ☐ NO

PRIMARY WATER MITIGATION TYPE

SUMP PUMP TYPE

AUXILIARY POWER

BACK UP VALVE

AUXILIARY WATER MITIGATION TYPE

SUMP PUMP TYPE

AUXILIARY POWER

BACK UP VALVE

MAIN WATER VALVE SHUT OFF TYPE

NO OF MAIN WATER VALVE SHUT OFF SENSORS

☐ SEWER BACKUP QUESTIONNAIRE ATTACHED

FIRE PROTECTION

DISTANCE TO HYDRANT within 150 metres

HYDRANT TYPE Standard

DISTANCE TO RESPONDING FIRE HALL within 5 kilometres

FIRE HALL NAME

SECURITY SYSTEM

FIRE None

BURGLARY None

SMOKE DETECTORS Local Complete

SMOKE DETECTOR TYPE

NO OF DETECTORS 2

IF ANY OF THE ABOVE ARE MONITORED, MONITORED BY

☐ ALARM CERTIFICATE ATTACHED

PREMISES ACCESS SECURITY TYPE

HOME SPRINKLERED? ☐ YES ☐ NO

BATHROOMS NO OF FULL 1 NO OF HALF 1

KITCHENS NO OF

KITCHEN #1 QUALITY

KITCHEN #2 QUALITY

GARAGE / CARPORT NO OF CARS

GARAGE TYPE

SWIMMING POOL YEAR

POOL FENCED? ☐ YES ☐ NO

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HABITATIONAL INSURANCE APPLICATION

UNDERWRITING INFORMATION LOC NO. 1

DETACHED OUTBUILDINGS/STRUCTURES (Additional limits may be required on any heated outbuildings)

NO	YEAR	STRUCTURE TYPE	EXTERIOR WALL FRAMING TYPE	HEATING APPARATUS TYPE	FUEL TYPE	TOTAL AREA	VALUE
						Sq ft / m2	
						Sq ft / m2	
						Sq ft / m2	

10. MORTGAGEE / LOSS PAYEE(S)

1	NAME		NATURE OF INTEREST	
	ADDRESS		CITY, PROV/STATE	POSTAL/ ZIP CODE
2	NAME		NATURE OF INTEREST	
	ADDRESS		CITY, PROV/STATE	POSTAL/ ZIP CODE
3	NAME		NATURE OF INTEREST	
	ADDRESS		CITY, PROV/STATE	POSTAL/ ZIP CODE

11. ATTACHMENTS

ATTACHMENTS	DESCRIPTION	DATE COMPLETED	ATTACHMENTS	DESCRIPTION	DATE COMPLETED

12. ADDRESS HISTORY

OCCUPANCY DATE FOR THIS LOCATION 2017 | 5 | 1 IF OCCUPANCY DATE IS LESS THAN 3 YEARS, PROVIDE PREVIOUS ADDRESSES BELOW

NO	ADDRESS	CITY	PROV	POSTAL CODE	DATE MOVED IN	DATE MOVED OUT
1						
2						
3						

13. LIABILITY EXPOSURES

All YES answers may require liability extension coverage or remarks explaining coverage declined

1 DO YOU OWN / RENT MORE THAN ONE LOCATION? ☐ YES ☒ NO

2 NUMBER OF WEEKS LOCATION RENTED TO OTHERS? 0

3 NUMBER OF ROOMS RENTED TO OTHERS? 0

4 DAYCARE OPERATION - NUMBER OF CHILDREN 0

5 DO YOU OWN A TRAMPOLINE? ☐ YES ☒ NO

6 DO YOU HAVE A GARDEN TRACTOR? ☐ YES ☒ NO

7 DO YOU HAVE A GOLF CART? ☐ YES ☒ NO

8 NUMBER OF SADDLE / DRAFT ANIMALS? 0

9 DO YOU OWN ANY UNLICENSED RECREATIONAL VEHICLES? ☐ YES ☒ NO

10 RENEWABLE ENERGY INSTALLATION ON PREMISES? ☐ YES ☒ NO

11 DO YOU OWN ANY WATERCRAFT? ☐ YES ☒ NO

12 NUMBER OF FULL TIME RESIDENCE EMPLOYEES? 0

13 IS THERE A CO-OCCUPANT THAT REQUIRES COVERAGE? ☐ YES ☒ NO

CO-OCCUPANT NAME

14 IS THERE ANY KIND OF BUSINESS OPERATION? ☐ YES ☒ NO

IF YES, DESCRIBE BUSINESS

15 NUMBER OF DOGS IN THE HOUSEHOLD 0

BREED(S) OF DOGS

16 TOTAL PROPERTY AREA (if greater than 1 acre) 0.0 acres

17 OTHER EXPOSURES NO

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HABITATIONAL INSURANCE APPLICATION

COVERAGES AND LIABILITY EXTENSIONS LOC NO1

14. COVERAGES

COVERAGE FORM TYPE **15 - Comprehensive Tenants Form**

RATING PLAN **Preferred**

COVERAGE DESCRIPTION	REQUESTED/ DECLINED	AMOUNT OF INSURANCE	DEDUCTIBLE	DEDUCTIBLE TYPE	TYPE OF 1	2	3	4	5	ESTIMATED PREMIUM
DWELLING BUILDING	DECLINED									
DETACHED PRIVATE STRUCTURES	DECLINED									
PERSONAL PROPERTY	REQUESTED	$40,000	1000	FL	RC					$212
ADDITIONAL LIVING EXPENSES	REQUESTED	$8,000		FL						
LEGAL LIABILITY	REQUESTED	$2,000,000		FL						$19
VOLUNTARY MEDICAL PAYMENTS	REQUESTED	$5,000		FL						
VOLUNTARY PROPERTY DAMAGE	REQUESTED	$1,000		FL						
SEWER BACK-UP	REQUESTED	$40,000	1000	FL						$65
SINGLE LIMIT	DECLINED									
GUARANTEED REPLACEMENT COST-BUILDING	DECLINED									
REPLACEMENT COST ON CONTENTS	REQUESTED									
UNIT OWNERS BUILDING IMPROVEMENTS AND BETTERMENTS ☐ ALL RISK ☐ NAMED PERILS	DECLINED									
LOSS ASSESSMENT ☐ ALL RISK ☐ NAMED PERILS	DECLINED									
CONDOMINIUM CONTINGENT LEGAL LIABILITY	DECLINED									
CONDOMINIUM ADDITIONAL PROTECTION ENDORSEMENT	DECLINED									
IDENTITY THEFT	DECLINED									
REPLACEMENT COST - CONTE	REQUESTED	$40,000		FL						
EARTHQUAKE	DECLINED									
POST-EARTHQUAKE DAMAGE	DECLINED									

ESTIMATED PREMIUM FOR THIS SECTION $ **296**

15. LIABILITY EXTENSIONS AND EXCLUSIONS

LIABILITY COVERAGE DESCRIPTION	REQUESTED/ DECLINED	AMOUNT OF INSURANCE	DEDUCTIBLE	DEDUCTIBLE TYPE	TYPE OF 1	2	3	4	5	ESTIMATED PREMIUM

ESTIMATED PREMIUM FOR THIS SECTION $

16. DISCOUNTS AND SURCHARGES

DISCOUNT/SURCHARGE DESCRIPTION	%	APPLIED TO PREMIUM Y/N	EST DISCOUNT SURCHARGE

DISCOUNTS AND SURCHARGES continued

DISCOUNT/SURCHARGE DESCRIPTION	%	APPLIED TO PREMIUM Y/N	EST DISCOUNT SURCHARGE

ESTIMATED PREMIUM FOR THIS SECTION $

TOTAL ESTIMATED PREMIUM FOR THIS PAGE $ **$296**

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HABITATIONAL INSURANCE APPLICATION

17. PREMIUM INFORMATION

TYPE OF PAYMENT PLAN	ESTIMATED POLICY PREMIUM	PROVINCIAL SALES TAX (if applicable)	ADDITIONAL CHARGES % / $	TOTAL ESTIMATED COST
Monthly	$297.00	$23.76	3.00 $8.91	$329.67
AMOUNT PAID WITH APPLICATION	**AMOUNT STILL DUE**	**NO. OF REMAINING INSTALMENTS**	**AMOUNT OF EACH INSTALMENT**	**INSTALMENT DUE DATE**
	$329.67	12	$27.47	

18. REMARKS

The producer is David Lee

HABITATIONAL INSURANCE APPLICATION

19. FULL DISCLOSURE

I, the Applicant, and the Insurer if the Insurer has requested information from it, have reviewed all parts of and attachments to this application and declare that all of the information is true and correct even if the information has been entered or suggested by the representative of the Insurer or by the insurance broker. I understand that acceptance of this application for insurance is based on the truth and completeness of this information, and that:

For all provinces and territories except Quebec: if I falsely describe the property to the prejudice of the Insurer, or misrepresent or fraudulently omit to communicate any circumstance that is material to be made known to the Insurer in order to enable it to judge of the risk to be undertaken, the contract may be void in whole or as to any property in relation to which the misrepresentation or omission is material.

For Quebec: I am bound to represent all the facts known to me which are likely to materially influence an insurer in the setting of the premium, the appraisal of the risk or the decision to cover it. The same applies to the insurer if the insurer requires it. Any misrepresentation or concealment of relevant facts by me or the insured nullifies the contract, even in respect of losses not connected with the risk so misrepresented or concealed.

For all provinces and territories: Any fraud or wilfully false statement in a statutory declaration in relation to any of the particulars required by applicable conditions, statutory or otherwise, to be specified in relation to a claim, vitiates the claim of the person making the declaration.

20. PERSONAL INFORMATION CONSENT

For all provinces and territories except Newfoundland and Labrador:

I am providing personal information of individuals in this form to apply for insurance. The personal information collected will be used for the purpose of this application or any renewal or change in coverage. I consent and authorize my broker, agent or insurer to the following:

i) To collect, use and disclose personal information on this form to, from and between insurers and other appropriate parties, subject to my broker's, agent's, and the insurer's policy regarding personal information. Such personal information will include policy history, loss history and rating information.

ii) That these collections, uses and disclosures are for the purposes necessary to communicate with me and the listed applicants, assess, manage, and underwrite risk, determine a premium, determine eligibility and conditions for a premium payment plan, investigate and settle claims, analyze business results, detect and prevent fraud, as permitted by law.

iii) To collect only my personal credit information including my credit score from consumer reporting agencies, as permitted by law for the purposes identified above. I understand that my consent for the use of credit information remains valid until withdrawn by me in writing. By withdrawing or failing to provide my consent to the use of credit information, I understand that I may not benefit from the best rates available to me.

I declare that all individuals whose personal information is contained in this form have authorized me to consent to i) and ii) above on their behalf.

If any other individuals wish to provide their consent with respect to the use of their credit information, they may provide their consent by also signing below.

I may obtain a copy of or ask questions about my broker's, agent's or insurer's personal information policies by contacting their respective privacy officers.

For Newfoundland and Labrador:

I am providing personal information of individuals in this form to apply for insurance.. The personal information collected will be used for the purpose of this application or any renewal or change in coverage. I consent and authorize my broker, agent or insurer to the following:

i) To collect, use and disclose personal information on this form to, from and between insurers and other appropriate parties, subject to my broker's, agent's, and the insurer's policy regarding personal information. Such personal information will include policy history, loss history and rating information;

ii) That these collections, uses and disclosures are for the purposes necessary to communicate with me and the listed applicants, assess, manage, and underwrite risk, determine a premium, determine eligibility and conditions for a premium payment plan, investigate and settle claims, analyze business results, detect and prevent fraud, as permitted by law.

iii) To collect only my personal credit information including my credit score from consumer reporting agencies, as permitted by law for the purpose of determining eligibility and conditions for a premium payment plan. I understand that my consent for the use of credit information remains valid until withdrawn by me in writing.

I declare that all individuals whose personal information is contained in this form have authorized me to consent to i) and ii) above on their behalf.

I may obtain a copy of or ask questions about my broker's, agent's or insurer's personal information policies by contacting their respective privacy officers.

Les Parties ont convenu que cette proposition et les documents connexes soient rédigés en anglais.
The Parties have specifically agreed that this application and any attachments to this application be drawn in the English language. 49584

APPLICANT'S SIGNATURE	DATE	APPLICANT'S SIGNATURE	DATE
X [signature]	Apr. 25. 2017	X	

21. BROKER QUESTIONNAIRE

IS THIS BUSINESS NEW TO YOUR OFFICE? [X] YES [ ] NO SINCE WHAT DATE HAVE YOU KNOWN THE APPLICANT? 2017 4 1 HAVE YOU BOUND THIS RISK? [X] YES [ ] NO

ARE THERE SPECIAL CIRCUMSTANCES REGARDING THIS APPLICATION WHICH THE COMPANY SHOULD KNOW? [ ] YES [X] NO IF YES, PROVIDE DETAILS IN REMARKS

HAVE YOU SEEN THE PRIMARY LOCATION? [ ] YES [X] NO IF YES, WHEN CONDITION OF PROPERTY [X] GOOD [ ] FAIR [ ] POOR

BROKER'S NAME (Please print)	BROKER'S SIGNATURE

HABITATIONAL INSURANCE BINDER

THIS BINDER IS CONFIRMATION OF AN INSURANCE CONTRACT, SUBJECT TO THE POLICY TERMS, CONDITIONS AND LIMITATIONS AND THE STANDARD MORTGAGE CLAUSE. THIS BINDER IS AUTOMATICALLY CANCELED WHEN REPLACED BY THE POLICY.

INSURANCE COMPANY	POLICY / BINDER NUMBER
Wawanesa Mutual Insurance Co.	56303
	BINDER EFFECTIVE DATE 0 0 0 TIME A.M. ☐ P.M. ☐

1. APPLICANT'S FULL NAME AND POSTAL ADDRESS	2. BROKERAGE/AGENCY INFORMATION
Khan, Shakil	FSB INSURANCE LTD.
1702 - 4011 BRICKSTONE MEWS	385 Connie Crescent
MISSISSAUGA POSTAL CODE L5B 0J7	Concord, Ontario POSTAL CODE L4K 5R2
CONTACT NUMBER(S) TYPE Home NO. TYPE Cell NO.	BROKER CODE / CONTACT NAME
TYPE Business NO. TYPE Fax NO.	PHONE NO. (905) 731-5177 / FAX NO. (905) 731-5742
PREFERRED DOCUMENT LANGUAGE ☒ ENGLISH ☐ FRENCH	CONTRACT NO. 7513 / SUB-CONTRACT NUMBER
EMAIL ADDRESS	GROUP / PROGRAM NAME / GROUP ID
WEBSITE ADDRESS	BROKER CLIENT ID 49584 / COMPANY CLIENT ID

3. POLICY PERIOD

EFFECTIVE DATE 2017 | 5 | 1 TIME 12:01 A.M. ☒ P.M. ☐ EXPIRY DATE 2018 | 5 | 1 AT 12:01 A.M. ALL TIMES ARE LOCAL TIMES AT THE APPLICANT'S POSTAL ADDRESS STATED HEREIN.

4. RISK LOCATION (IF DIFFERENT FROM APPLICANT'S ADDRESS)

1702 -4011 BRICKSTONE MEWS

MISSISSAUGA, ONTARIO L5B 0J7

5. MORTGAGEE / LOSS PAYEE(S)

		NATURE OF INTEREST
1st		
2nd		
3rd		

6. COVERAGE: FORMS, LIMITS & DEDUCTIBLES

PACKAGE FORM AND TYPE: 15 - Comprehensive Tenants Form

SINGLE LIMIT	DWELLING BUILDING	DETACHED PRIVATE STRUCTURE	PERSONAL PROPERTY	ADDITIONAL LIVING EXPENSES	LEGAL LIABILITY	VOLUNTARY MEDICAL PAYMENTS	VOLUNTARY PROPERTY DAMAGE (DEDUCTIBLE)
$0	$0	$0	$40,000	$8,000	$2,000,000	$5,000	$1,000

7. REMARKS

BROKER / AGENT NAME (Please Print): David Lee

SIGNATURE OF BROKER / AGENT: X

DATE: 2017 4 25

CANSTAY

From: "Omar Shaath" <omar.s@rokslogistics.com>
Date: April-26-17 12:12 PM
To: <chaza@canstay.com>; <info@canstay.com>
Subject: Fwd: 1702 ID

Sent from my iPhone

Begin forwarded message:

> **From:** Stefan Solomun <solomunstefan@gmail.com>
> **Date:** April 26, 2017 at 11:46:42 AM EDT
> **To:** Omar Shaath <omar.s@rokslogistics.com>
> **Subject: Fwd:**
>
> Hello Omar,
>
> Please find the Driver's License of the Father and the person whose name is on the lease (Shakil Khan). His Son recently lost his whole wallet and is getting his ID's back. He will try to send me a picture when he replaces one of the documents today. Please also send over the accepted agreement when you get the chance.
>
> Best,
> Stefan Solomun
> ---------- Forwarded message ---------
> From: **Stefan Solomun** <solomunstefan@gmail.com>
> Date: 26 April 2017 at 11:45
> Subject:
> To: Stefan Solomun <solomunstefan@gmail.com>

--
Stefan Solomun, IBBA
Sales Representative

RE/MAX Premier Inc., Brokerage
9100 Jane Street, Building L Suite 77, Vaughan, ON, L4K 0A4
Dir. 416.710.2721 | Tel. 416-987-8000| Fax. 416-987-8001

TD Canada Trust
PERSONAL CR - MMS/BROKER
3500 STEELES AVE E 4TH FLR TWR 3
MARKHAM, ON L3R0X1
www.tdcanadatrust.com

December 16th, 2016
Khalid Algwaiz
2487 Confederation Parkway
Mississauga, Ont
L5B 1S1

Dear Valued Customer:

Re: Mortgage Approval Confirmation

This will confirm that you qualify for a residential mortgage loan with The Toronto-Dominion Bank ("TD Canada Trust"), secured by the property at Suite 1702 – 4011 Brickstone Mews in Mississauga, Ontario (the "Property"), with the following terms and on the following conditions, including the Standard Conditions included at the bottom of the letter, following the signature line:

Applicant(s):	Khalid Algwaiz
Principal Amount:	$345,900
Fixed Annual Interest Rate:	4.64% per annum, calculated semi-annually not in advance
Interest Rate Expiry Date:	June th 2017

This means the Interest Rate for the Term selected will expire on this date.
Prepayment Option: Closed to prepayment privileges, subject to terms of mortgage

Term:	5 years
Amortization:	30 years
Anticipated Closing Date:	March 20th, 2017

Other charges may be payable to TD Canada Trust on closing, including Appraisal and Administration fees (including our legal fees and costs for registering the mortgage).

This Approval Confirmation is valid until July 25th, 2017.

Any Mortgage Approval Confirmation previously issued for this property is no longer valid.

Signed by:

Per:

The Toronto-Dominion Bank

Standard Conditions

- Confirmation of credit application details;
- No change in, and the accuracy of, the information provided;
- Execution of TD Canada Trust documentation;
- The Property meeting TD Canada Trust's normal lending requirements;
- The Property meeting the mortgage default insurer's requirements;

528322 (0212)

- Valid First Mortgage Security to be provided on the Property.

528322