MERIX

Paradigm Quest Inc.
390 Bay St, Suite 1800
Toronto, ON
M5H 2Y2
T: 1-877-637-4911
F: 1-877-637-4915

AGREEMENT FOR PRE-AUTHORIZED DEBITS (PAD)

Account Holder Name(s) and Mortgage Number		Mortgage number: 1607693
Last and first name(s) of Account Holder(s) SEMMELINK WILLEM.		Telephone number (250) 215-6833
Address (Number, Street, City, Province) 311 ASPEN ROAD		Postal code V1W 4S5
Name and address of bank/financial institution BMO 3695-4th Ave West Vancouver BC V6R 1P2	Transit number 27140	Account number 3134 890

Authorization of Debits

I authorize Paradigm Quest Inc. ("Paradigm") and the financial institution set out above or any other financial institution I may appoint, to debit periodic mortgage payments in the amount indicated below according to my instructions.

Payment Frequency (refer to pg. 2)	Payment Date (refer to pg. 2)	Payment Amount
BI-WEEKLY		

Type **of PAD Agreement:** ☒ Personal/Individual ☐ Business

Waiver **of Notice: I agree to waive any written notice before the first PAD is made or when any change is made to the payment amount because of an interest rate adjustment, renewal or other change.**

Other PADs: Paradigm may draw additional sporadic PADs where authorized by me, for example for a prepayment on the mortgage or to pay a fee. If a debit is dishonoured, Paradigm may represent a PAD in place of the dishonoured PAD.

Change or Cancellation: I will advise Paradigm of any changes in this Authorization at least 10 business days prior to the next payment date.

I can cancel this Authorization at any time by sending a notice to Paradigm at least 10 business days prior to the next payment date. The cancellation of this Authorization applies only to the method of payment and will not change or terminate my obligations under the mortgage. To obtain a sample cancellation form or for more information on my right to cancel a PAD agreement, I may contact Paradigm or visit www.cdnpay.ca.

Paradigm can cancel this Agreement by sending 30-day notice to you. The Authorization can also be cancelled without notice if the financial institution noted above refuses the pre-authorized debits for any reason or you are in default under the mortgage.

Authorization to collect and communicate personal information: I consent to the disclosure of the personal information in this Authorization to Paradigm and its agents.

Signature(s)

I guarantee that all persons whose signatures are required for this bank account have signed this Authorization.

Reimbursement

I have certain rights of recourse if a PAD does not comply with the terms of this Agreement. For example, I have the right to receive reimbursement for any PAD that is not authorized or that is not compatible with the terms of this PAD Agreement. For more information on my rights of recourse, I may contact Paradigm or visit www.cdnpay.ca.

Signature of all account holder(s)

Signature of account holder — Date (DD/MM/YYYY): 13-03-2016

Signature of account holder — Date (DD/MM/YYYY): 13-03-2016

IMPORTANT: You must attach a personal cheque marked "VOID" to avoid errors in transcription. Your name and address and the account number must be preprinted on the cheque.

MERIX Financial mortgages are facilitated through Paradigm Quest Inc.

MR WILLEM SEMMELINK
MRS BARBARA SEMMELINK
311 ASPEN RD
KELOWNA BC V1W 4S5
(250) 215-6833

095

DATE 2016-03-17
Y Y Y Y M M D D

PAY TO THE ORDER OF VOID $

100 DOLLARS

Security features included. Details on back.

BMO Bank of Montreal
3695 - 4TH AVE. WEST
VANCOUVER, B.C. V6R 1P2

MP

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