

TERAVIEW® AUTHORIZED SERVICES APPLICATION AND PAYMENT FORM

Use of Teraview is subject to terms and conditions. Your application is subject to acceptance by Teranet Inc. and its affiliates ("Teranet"). NOTE: Information collected from this form and the resulting usage of the Authorized Services will be used by Teranet for the purposes of administration of and access to systems, products and services. For questions on collection and use of this information, please contact Teranet at 1-800-208-5263 or 416-360-1190.

I. ACCOUNT HOLDER INFORMATION			
CCOUNT NAME (EXISTING ACCOUNT HOLDERS ONLY)	ACCOUNT NUMBER (EXISTING ACCOUNT HOLDERS ONLY)		
CCOUNT HOLDER (BUSINESS/FIRM/ORGANIZATION/INDIVIDUAL) LEGAL NAME			
TRET	CITY	PROVINCE	POSTAL CODE
ELEPHONE (INCLUDE AREA CODE AND EXTENSION)	FACSIMILE (INCLUDE AREA CODE)		

2. TERAVIEW LICENCE PAYMENT (PLEASE CONTACT TERANET SALES AT 1-800-208-5263 OR 416-360-1190)

Getting Started Package (for details on content, please see the Teraview Pricing Guide on https://www.teranetexpress.ca/content/tvuser/newcustomer/gettingstarted/software.pdf Indicate your Teraview "Key" areas below:		Quantity x Rate = Cost		
Key Land Registry Office (LRO) For Searches	Default Key Enforcement Office (EO) For Searches (included in price)	\$595.00		
Additional User Package(s) (includes 1 Teraview Softw	vare Licence and 1 Portas® Personal Security Licence)	\$345.00		
Additional Teraview Software Licence(s)		\$180.00		
Additional Portas Personal Security Licence(s)		\$195.00		
Additional Key Enforcement Office(s)				
	EACH ADDITIONAL KEY EOS (OPTIONAL, FOR AN ANNUAL FEE)	\$60.00		
		SUB TOTAL		
x 13% HST (#130867526)				
Initial Deposit Account Balance				
	TC	DTAL REMITTANCE		
VISA AMEX CARDHOLDER NAME (AS IT APPEARS ON CREDIT CARD) CARD NUMBER X CARDHOLDER SIGNATURE	Cheque (payable to Teranet Inc.)	t (for existing Account Holders only)		
4. AUTHORIZED ACCOUNT HOLDER REPRESENTATIVE ACKNOWLEDGMENT (PLEASE PRINT)				
FIRST NAME	MIDDLE NAME AND/OR INITIAL LAST NAME			
requested Authorized Services which are located at http://www.accordance with applicable statutes and regulations thereunder any related forms including your Portas Personal Security Licer	e confirms that (i) it has verified the accuracy of the information it has provided (ii) agree teranetexpress.ca/content/tvuser/newcustomer/installtv/terms/TV6.pdf (iii) use of the Aut (iv) has authority to bind the Account Holder and (v) agrees to the payment method ide ice Application(s) to Teranet for its review and acceptance. Teraview Authorized Accour nts for the payment of charges, fees and taxes and in the case of electronic registration,	thorized Services must be in ntified above. Sign and send this and nt Holder Representatives authorize		
On behalf of the Account Holder and its User(s), I agree	ATURE (I HAVE THE AUTHORITY TO BIND THE ACCOUNT HOLDER) DATE (MM/I to Teranet Inc. sending newsletters containing news, updates and promotions regarding contacting Teranet Inc. as set out below. Even if you unsubscribe, you may still receive n	, Teranet Inc.'s products. You and any		

FAX THIS FORM AND ATTACHMENTS TO TERANET INC.: 416-360-6069 OR MAIL. TERANET INC. IS LOCATED AT 123 FRONT STREET WEST, SUITE 700, TORONTO, ONTARIO M5J 2M2.

YOU MAY CONTACT TERANET INC. EITHER BY CALLING 416-360-5263 OR EMAILING US AT INFO@TERANET.CA OR VISITING US ON OUR WEBSITE AT WWW.TERANET.CA.



Requirements Checklist

Section 1 – Account Holder Information:

Account Name & Account Number (existing Teraview accounts only)

Firm Name, address and contact information

Section 2 – Teraview Licence Payment:

New Accounts – Please indicate your Key Land Registry Office (LRO) & Default Key Enforcement Office (EO)

Please indicate the quantity and cost of product to be purchased

☐ Total Remittance (HST included)

Section 3 – Method of Payment:

□ Indicate your Method of Payment (VISA, Mastercard, American Express, DAPP

or Cheque*)

*Please note for cheque payment, the order will be processed once payment has been received.

Section 4 – Authorized Account Holder Representative Acknowledgment:

Authorized Account Holder Representative's name, signature and date.