

Teraview® Account Holder Name Change Request

Date: _____

TV Account Number:

Account Name:

Teraview Account Holder:

New Teraview Account Holder:

Account Holder Representative:

As the Authorized Account Holder Representative for the Teraview Account noted above, you have the authority to request changes to information maintained by Teranet Inc. for your Teraview account.

If you have been approved for electronic registration on the original account and would like to continue to register in Teraview, please apply to the Ministry of Government Services providing them with your current business name, TV account number and any other artifacts they require to obtain approval on the new name before submitting the change to Teranet.

In order to effect this change, while allowing the New Teraview Account Holder continued access to existing Teraview dockets, you must confirm to Teranet Inc. that the following are true:

1. the above noted change from Teraview Account Holder to New Teraview Account Holder is not a result of a dissolution, winding-up, amalgamation, merger or bankruptcy;
2. all filings and notices required to legally change _____ into _____ have been completed;
3. client consent to the disclosure of the Teraview Account Holder dockets to the New Teraview Account Holder has been obtained; and
4. by signing below, the Authorized Account Holder Representative confirms that (i) it has verified the accuracy of the information it has provided (ii) agrees to the Teraview Terms & Conditions and (iii) has authority to bind the Account Holder.

If you require Teraview forms to update your Personal Security Licence User(s) or banking information, forms are available at <http://www.teraview.ca/purchase/purchase.html>.

I acknowledge and represent, on behalf of the Teraview Account Holder, that the above representations are true. Any misrepresentation herein constitutes a breach of the provisions of the Teraview Terms & Conditions. Teranet Inc., its related and affiliated entities, and its directors, officers and employees shall be indemnified by the Teraview Account Holder from any claim that may be brought in relation to any of the above noted representations.

The above noted name change is to be effected as of the _____ day of _____ (month, year)

Authorized Account Holder Representative Signature

Date Signed

All requests are subject to acceptance by Teranet Inc.

FAX TO TERANET CUSTOMER SERVICE 416-360-6069 or EMAIL info@teraview.ca