POWER OF ATTORNEY to Apply to the Canada Border Services Agency to Obtain a Carrier Code and to Secure the Bonded Carrier Operations with a Customs Bond

The Principal Company legal name hereafter referred to as the "Principal", revoke any previous power of attorney made by the principal for the purpose of obtaining a carrier code from the Canada Border Services Agency (CBSA) and APPOINT: **Name of the Company and/or Person(s) you appoint as Attorney** a **Nationality of Attorney** legal entity, with its principal place of business at **business address of Attorney** to act as my attorney(s) for the purpose of applying for a CBSA carrier code on behalf of the Principal, and to sign the Customs Bond to secure bonded carrier operations on behalf of the Principal.

NOW, THEREFORE, the Principal does, make, constitute and appoint **name of Attorney** its true and **name of the company and/or person(s) you appoint as Attorney** lawful attorney for itself:

(a) to execute, acknowledge and deliver an indemnity on behalf of the Principal to the Customs Bond Issuer (including its agents or bond brokers) or other person or entity as **name of Attorney** deems necessary in order to obtain and validate the Customs Bond for securing bonded carrier operations with the CBSA, in such form as the Customs Bond Issuer or such other person or entity shall require, including any and all associated or related agreements or documentation on behalf of the Principal;

(b) to execute, acknowledge and cause to be delivered:
- (i) the Customs Bond for securing bonded carrier operations with the CBSA,
- (ii) the application to transact carrier operations with the CBSA, including any and all associated or related agreements or documentation on behalf of the Principal, and
- (ii) any termination, revocation or other associated or related agreements or documentation on behalf of the Principal order to terminate the Customs Bond; and

(c) to execute and perform any other act or thing which is necessary, or in the opinion of **name of Attorney**, ought to be done in connection with the foregoing.

The Principal hereby confirms all lawful acts done by **name of Attorney** pursuant to this Power of Attorney. The Principal further declares that as against the Principal or persons claiming under the Principal, everything which **name of Attorney** shall do pursuant to this Power of Attorney shall be valid and binding in favor of any person or entity claiming the benefit who has not received actual written notice that this Power of Attorney has been revoked. This instrument may be executed in more than one counterpart, any one of which shall, for all purposes, be deemed an original.

DATE OF EFFECTIVENESS

Unless otherwise stated in this document, this continuing Power of Attorney will come into effect on the date it is signed and witnessed.

This Power of Attorney shall terminate on the occurrence of the CBSA receiving from the Principal actual written notice that this Power of Attorney has been revoked. It is the Principal's responsibility to inform the Attorney in the event this Power of Attorney is revoked or its terms modified.

This Power of Attorney has been executed and agreed to by the Principal as undersigned.

IN WITNESS WHEREOF, the Principal has caused this Power of Attorney to be signed by a duly authorized official and its corporate seal to be affixed this **day** day of **month**, **year**.

***Name of Principal:*_____**

Signature: _____
Owner, President, Chief Executive Officer (CEO), Executive Director or a similar highest ranking official

Name: _____
Title: _____

Province/State of _____

Country of _____

On the **day** day of **month**, in the year **year**, before me, the undersigned, a Notary Public in and for said Province/State, personally appeared, **Name of Principal signatory**, personally known to me or proved to me on the basis of satisfactory evidence to be the individuals(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Give under my hand and Notarial Seal this **day** day of **month**, **year**.

_____
Signature - Notary Public

Notary SEAL

A duplicate or facsimile copy or electronic reproduction of the original shall have the same force and effect as the original.