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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | **Declaration of the Lender**  **(Schedule A)** | | | | | | | | | |
| **Please have this form completed by the lender and return the original to Investissement Québec.** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Name of applicant company: | | | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Name of lender (legal name): | | | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Address: |  | | | | | | | | | | | | | Transit number: | | |  | |
|  |  | | | | | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | | | | |
| If Desjardins, name of branch: | | | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Address | | |  | | | | | | | | | | | Transit number: | |  | | |
| (business centre): | | |  | | | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Name of account manager at financial institution: | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Telephone No.: | |  | | | | |  | | | | Fax No.: | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Line of credit granted to this company: | | | | | |  | | | |  | | Interest rate: |  | |  | | | |
|  | | | | | | | | | | | | | | | | | | |
| Amount owing on line of credit: | | | | | |  | | | |  | | As at: |  | | | | |  |
|  | | | | | | | | | | | | | | | | | | |
| Security held against line of credit: | | | | | |  | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Other loans and security held: | | | | |  | | | | | | | | | | | | | |

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| **LOAN** | | | | | | | | | | | | | | |
| The lender agrees to grant this company | | | | | | | | | | | | | | |
| a demand loan of | $ | | bearing interest at the annual rate of | | | | **%** | | | | | , subject to the security described | | |
| below and provided there has been no major change in the company’s financial situation. The lender declares that it has read this application and the declarations herein and that, in addition to the security described below, it has obtained a hypothec on all present and future debts and accounts receivable which is senior-ranking with respect to present and future tax credits. The fact that the lender has obtained such a hypothec against tax credits in no way constitutes a guarantee as to the validity and enforceability of such hypothec in relation to provincial tax credits, as long as legislative amendments allowing them to be transferred have not come into force. | | | | | | | | | | | | | | |
| Detailed description of additional security and other conditions related to the proposed loan: | | | | | | | | | | | | | | |
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| Conditions to be fulfilled prior to disbursement of funds **(the lender must obtain a certificate of guarantee from Investissement Québec)**: | | | | | | | | | | | | | | |
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| **LOSS GUARANTEE** | | | | | | | | | | | | | | |
| The lender requires the loan guarantee for this purpose. The lender further acknowledges that the financing from Investissement Québec will be granted on terms determined by Investissement Québec in agreement with the lender. The financing granted is not binding on the lender until it has made the first loan disbursement. | | | | | | | | | | | | | | |
|  | | |  |  | | | | |  | |  | | |  | |
| *Signature of lender* | | |  | *Title of authorized signatory* | | | | |  | | *Date* | | |  | |
| ***N.B. Where applicable, please have the following third-party authorization signed.*** | | | | | | | | | | | | |  | |
|  | | | | | | | | | | | | | | |
| **AUTHORIZATION OF THE COMPANY** | | | | | | | | | | | | | | |
| I/We, the undersigned | |  | | | , as |  | | | | | | | | |
| hereby authorize the lender to provide Investissement Québec with all information or documents (security, guarantees, etc.) related to loans or advances to the applicant company and related to this application and the financial product or program. | | | | | | | | | | | | | | |
|  | | |  |  | | | |  | |  | | |  | |
| *Signature* | | |  | *Title of authorized signatory* | | | |  | | *Date* | | |  | |