



SHORT FORM POWER OF ATTORNEY

Date: _____

Canada Border Services Agency
Port of Vancouver
Vancouver, B.C.

Dear Sirs:

This letter will serve as authorization for ACGI Shipping Inc., to act as our agent with the Canada Border Services Agency for the purpose of importing goods to Canada.

Furthermore, please accept this letter as authorization for ACGI Shipping Inc., to debit our credit card for all charges associated with importation, including but not limited to Customs Brokerage Fees, Customs Duties, Taxes, or transportation charges as required. Please note, a 3% disbursement fee will be applied to all funds disbursed on the client's behalf, minimum \$5.00, (credit card transaction will show as ACGI Shipping Inc).

Importer Name: _____ Signature: _____

Address: _____

DATE OF BIRTH: _____ **Postal Code:** _____

Phone No.: _____ Fax No.: _____

E-Mail Address: _____

Full Address of Credit Card Holder (If it is different with above address):

Credit Card #: _____ VISA: _____ M/C: _____

Expiry Date: _____ Security Code: _____

Authorized Signature: _____

Name of Signatory (as displayed on credit card): _____

Please note there is a 3% disbursement fee for all credit card transactions

Fax: (604)688-3401

Phone: (604)484-8022

Email: logistics@acgishipping.com