

PORTFOLIO CREDIT INSURANCE

DIRECTION TO PAY (SPECIFIC RECEIVABLES) (EXPORT POLICY)

This Direction to Pay is given in connection with Export Portfolio Credit Insurance Policy No.

(the "Policy") issued by Export Development Canada ("EDC") to

(the "Main Insured").

Terms defined in the Policy have the same meaning when used in this Direction to Pay. Once processed by EDC, this Direction to Pay will be sent by email to the Main Insured and the Financial Institution identified below.

FINANCIAL INSTITUTION DETAILS

| Name of Financial Institution | |
|-------------------------------|--|
| Branch Address | |
| Contact Name | |
| Contact Telephone | |
| Contact Email | |

Any reference to "Company" in this form includes the Main Insured and any Additional Insured covered under the Policy and for the purpose of this Direction to Pay, the Company is acting on its own behalf and on behalf of any Additional Insured under the Policy.

On behalf of my Company:

1. I direct EDC to pay directly to the Financial Institution indicated above, any monies that are now payable or that may become payable to my Company under the Policy (including any recoveries), in respect of the account(s) receivable listed below or in any addendum to this Direction to Pay:

| Name and address of Buyer (Street, City, Province, Country and Postal Code) | Amount of receivable | Invoice date | Invoice number | Date of Shipment |
|--|----------------------|--------------|-------------------|---------------------|
| | | | | |
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2. I understand that, immediately following the date that this Direction to Pay is noted in EDC's records, EDC may provide the Financial Institution with all information and documents concerning the Policy which is also available to my Company, including information and documents concerning my Company's compliance with the terms and conditions of the Policy, its termination or default thereunder, Credit Approvals, overdue reports and losses and claims. I consent to such disclosure and I agree to EDC using any technology as EDC may choose from time to time for the purposes of providing any of that information to the Financial Institution;

- 3. I acknowledge that, if any of the information disclosed to the Financial Institution in conformity with this Direction to Pay is considered "personal information" as defined by the Privacy Act, it will only be disclosed in compliance with the Privacy Act; and
- 4. I acknowledge that this Direction to Pay cannot be revoked without the written consent of the Financial Institution.

This Direction to Pay is not an assignment of the Policy and does not give the Financial Institution any right against EDC whatsoever (including the right to file a claim or sue under the Policy).

EDC reserves the right to set-off any amount payable under the Policy or this Direction to Pay against any other amount owed to EDC by the Company or by the Financial Institution.

This Direction to Pay will apply to the Policy as it may be renewed, extended or amended from time to time.

| Main Insured Name | |
|----------------------|--|
| Authorized Signature | |
| Date | |

This Direction to Pay has been noted in EDC's records on

EXPORT DEVELOPMENT CANADA

| Ву | |
|-------|--|
| Name | |
| Title | |