
**PROOF OF CLAIM RELATING TO AGREEMENTS TO PURCHASE RESIDENTIAL
CONDOMINIUM UNITS TO BE CONSTRUCTED BY OR ON BEHALF OF QUEEN'S
CORNER CORP., BEING THE FORMER OWNER OF THE PROPERTY
MUNICIPALLY KNOWN AS 1003 QUEEN STREET EAST, TORONTO, ONTARIO
(hereinafter referred to as "the Company")**

A. PARTICULARS OF CLAIMANT:

1. Full Legal Name of Claimant: _____

(the "Claimant"). (Full legal name should be the name of the original Claimant, notwithstanding whether an assignment of a Claim, or a portion thereof, has occurred).

2. Full Mailing Address of the Claimant (the original Claimant not the assignee):

3. Telephone Number: _____

4. E-Mail Address: _____

5. Facsimile Number: _____

6. Attention (Contact Person): _____

7. Has the Claim been sold or assigned by the Claimant to another party (check one)?

Yes: No:

B. PARTICULARS OF ASSIGNEE(S) (IF ANY):

8. Full Legal Name of Assignee(s):

(If Claim (or a portion thereof) has been assigned, insert full legal name of assignee(s) of Claim (or portion thereof). If there is more than one assignee, please attach a separate sheet with the required information.)

9. Full Mailing Address of Assignee(s):

10. Telephone Number of Assignee(s): _____

11. E-Mail Address: _____

12. Facsimile Number: _____

13. Attention (Contact Person): _____

C. PROOF OF CLAIM:

I, _____
[name of Claimant or Representative of the Claimant], of

_____ do hereby certify:
(city and province)

(a) that I (check one)

am the Claimant; OR

am _____ (state position or title) of

(name of Claimant)

- (b) that I have knowledge of all the circumstances connected with the Claim referred to below;
- (c) the Claimant asserts its claim against Tarion Warranty Corporation (“**Tarion**”); and
- (d) Tarion was and still is liable to the Claimant for the total amount of \$_____. (Claims denominated in a currency other than Canadian dollars shall be converted by the Manager to Canadian Dollars at the Bank of Canada noon spot rate as at the Claims Bar Date.)

D. PARTICULARS OF CLAIM:

Other than as already set out herein the particulars of the undersigned’s total Claim are attached.

(Provide all particulars of the Claim and supporting documentation, including amount, description of transaction(s) or agreement(s) giving rise to the Claim, name of any guarantor(s) which has guaranteed the Claim, date and amount of invoices, particulars of all credits, discounts, etc. claimed.)

E. FILING OF CLAIM

This Proof of Claim must be received by the Manager by no later than 4:00 p.m. (Toronto Time) on December 16, 2016, the Claims Bar Date, by prepaid ordinary mail, courier, personal delivery or electronic or digital transmission at the following address:

Schonfeld Inc.
Court-appointed Manager of Queen's Corner Corp.
77 King Street West, Suite 3000, P.O. Box 95
TD Centre North Tower
Toronto, ON M5K 1G8

Attention: Stephanie Williams
Telephone: 416-862-7785, Extension 4
E-mail: swilliams@schonfeldinc.com
Fax: 416-862-2136

FAILURE TO FILE YOUR PROOF OF CLAIM AS DIRECTED BY THE CLAIMS BAR DATE WILL RESULT IN YOUR CLAIM BEING BARRED AND IN YOU BEING PREVENTED FROM MAKING OR ENFORCING A CLAIM AGAINST TARIION WARRANTY CORPORATION IN RESPECT OF ANY AGREEMENT TO PURCHASE A CONDOMINIUM UNIT TO BE CONSTRUCTED BY OR ON BEHALF OF QUEEN'S CORNER CORP.. IN ADDITION, YOU SHALL NOT BE ENTITLED TO FURTHER NOTICE, AND SHALL NOT BE ENTITLED TO PARTICIPATE AS A CREDITOR, IN THESE PROCEEDINGS.

After you file your Proof of Claim, the Manager and/or Tarion may require additional information from you in order to evaluate your Proof of Claim.

Dated at _____ this ____ day of _____, 2016.

Signature of Claimant