

## **CONFIDENTIALITY AGREEMENT**

AND:	
and/or associated persons or companies (the Confide	ntial Information "Recipient")
<b>CONCERNING:</b> Confidential or proprietary information Information) to be provided to the Receipt upon execution	

**DEFINITIONS AND INTERPRETATIONS:** For the purposes of this Confidentiality Agreement, "Provider" includes the employees and principals of the Provider and "Recipient" includes the employees and principals of the Recipient, the employees, agents, advisors, consultants and lenders of the Recipient's principal and the parties specifically authorized under this Agreement to receive the Confidential Information. "Confidential Information" includes written, electronic and verbal information designated in this Agreement as confidential or proprietary.

**TERMS:** In consideration of receiving the Confidential Information from the Provider, the Recipient agrees to hold and treat the Confidential Information in the strictest confidence and agrees not to disclose the Confidential Information to any party who has not been authorized under this Agreement to receive the Confidential Information. This Agreement authorizes the Recipient to share the Confidential Information with advisors, employees and partners.

The Confidential Information is provided for the sole and limited use by the Recipient, including the parties specifically authorized under this Agreement to receive the Confidential Information. If the Recipient intends to disclose any or all of the Confidential Information to any other party who is not authorized under this Agreement to receive the Confidential Information, the Recipient agrees to enter into a Confidentiality Agreement with the other party on the same terms and conditions as included herein and obtain the Provider's written authority prior to releasing the Confidential Information to the other party.

The Recipient shall be liable to the Provider for any non-compliance of this Confidentiality Agreement by the Recipient and for any disclosure of the Confidential Information by any other party who has received the Confidential Information from the Recipient.





The Recipient agrees to make all inquiries and communications concerning the Confidential Information and the Property through the Provider. The Recipient agrees not to contact anyone other than the Provider for additional information about the Property, including employees, tenants, business contacts, suppliers, government agencies, etc., or to inspect the Property, without the prior written consent of the Provider. If the Recipient is no longer interested in continuing negotiations for the Property or completing a transaction with the Provider, the Recipient agrees to return all written Confidential Information to the Provider and to destroy any written and electronic copies in the Recipient's possession.

The Recipient agrees that any investigations of the Property are at the sole risk and expense of the Recipient and the Provider will not be liable for any costs related to such investigations or due diligence without the express written authorization from the Provider. The Provider is not liable for the accuracy or completeness of the Confidential Information and is not liable in any way to the Recipient as a result of providing the Confidential Information to the Recipient.

Any liability or dispute arising out of this Confidentiality Agreement, or any non-compliance with this Agreement shall be subject to and governed by the laws of the Province of Ontario, Canada. The Recipient executing this Agreement agrees to inform any Recipient of the Confidential Information that the information is confidential. This Agreement shall be deemed given and received when transmitted electronically by facsimile or e-mail.

**SIGNATURE OF PROVIDER** (the Confidential Information "Provider")

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Dated at	, This	Day of	, 2023		
Company Name:	Kaizen Capital	Realty Partners			
Company Address	s: 18 King St Eas	st, Suite 1400, Toro	onto, ON M5C 1C4		
Company Phone:	(416)-214-7547				
Authorized Representative/Signing Officer(PRINT):					
Signature:					
SIGNATURE OF RECIPIENT (the Confidential Information "Recipient")					
Dated at	, This	Day of	, 2023		
Company Name:					
Phone Number &	Email:				
Authorized Representative/Signing Officer(PRINT):					
I have the authorit	y to bind the cor	poration			
Signature:					

