



CANADA
PROVINCE OF QUEBEC
DISTRICT OF: 01-MONTREAL
COURT NO. : 500-11-049870-153
OFFICE NO: 155625-004

SUPERIOR COURT
« Companies' Creditors Arrangement Act »
(LRC 1985, ch.C-36) »

IN THE MATTER OF THE
ARRANGEMENT OR COMPROMISE OF : **LES GRANDS TRAVAUX SOTER INC., LES
CONSTRUCTIONS MARC LUSSIER INC. AND
9063-0757 QUÉBEC INC.**

Legal persons having their principal place of business located at
4085 Saint-Elzéar Road East, in the city of Laval, in the
province of Québec, H7E 4P2.

Debtor Companies

PROOF OF CLAIM

The completed Proof of Claim together with supporting documents must be received by Raymond Chabot Inc. no later than 5:00 p.m. (EDT) on March 18, 2016 by mail, courier, email or fax at the following address:

RAYMOND CHABOT INC.,
Monitor of the business and financial affairs of the Debtor companies
Attention: Jean Gagnon, CPA, CA, CIRP
National Bank Tower
600 de La Gauchetière Street West, Suite 2000
Montréal (Quebec) H3B 4L8
Email : claims-gts@rcgt.com
Fax : 514 390-4171

A. PARTICULARS OF CREDITOR

1. Full legal name of creditor: _____ (the “**Creditor**”).
2. Full mailing address of the Creditor: _____

3. Telephone number of Creditor: _____
4. Fax number of Creditor: _____
5. E-mail address: _____
6. Contact person: _____

B. PROOF OF CLAIM

I, *(name of Creditor or representative of the Creditor)* _____, hereby certify that I am a creditor of *(check as appropriate)* :

- Les Grands Travaux Soter Inc.
- Les constructions Marc Lussier Inc.
- 9063-0757 Québec Inc.

and I am aware of all circumstances surrounding the Claim referred to herein

Note: A Creditor who holds different Claims against different Debtor Companies must file a distinct Proof of Claim for each Claim.

C. NATURE OF CLAIM:

(check and complete appropriate category)

A. UNSECURED CLAIM IN THE AMOUNT OF CA\$ _____
In respect of this debt, the Creditor does not hold any assets of the Debtor companies as security;

B. SECURED CLAIM IN THE AMOUNT OF CA\$ _____
In respect of this debt, the Creditor holds assets of the Debtor companies valued at CA\$ _____ as security, particulars of which are as follows;

(Give full particulars of the security, including the date on which the security was given and attach a copy of the security documents):

PARTICULARS OF CLAIM:

Other than as already set out herein, the particulars of the Creditor's claim are attached. A DETAILED, COMPLETE STATEMENT OF ACCOUNT MUST BE ATTACHED TO THE PROOF OF CLAIM. PROVIDE ALL PARTICULARS OF THE CLAIM AND SUPPORTING DOCUMENTATION, INCLUDING AMOUNT, DESCRIPTION OF TRANSACTION(S) OR AGREEMENT(S) GIVING RISE TO THE CLAIM.

D. CLAIM AGAINST THE DIRECTORS AND OFFICERS

The Claim referred to in Section B and C also engages the liability of the Directors and Officers of the relevant Debtor Company

Description of the Claim	Amount
_____	_____
_____	_____
_____	_____

E. CLAIM AGAINST A BONDING COMPANY

The claim referred to in Section B and C also engages the liability of Intact compagnie d'assurance or La Garantie, compagnie d'assurance de l'Amérique du Nord as Bonding Companies of the Debtors Companies ("Bonding Companies").

(Please specify the entity and the amount):

Bonding Company	Amount
Intact compagnie d'assurance	
La Garantie, compagnie d'assurance de l'Amérique du Nord	

(Provide complete details regarding the alleged liability of the Bonding Companies, and enclose all support documentation in connection with such Claim against one of the Bonding Companies)

F. FILING OF CLAIM

Creditors who fail to file a Proof of Claim and documentation in support thereof, as directed, before 5:00 p.m. (EDT) on March 18, 2016, shall not be entitled to any further notice, shall not be entitled to participate in the present proceedings as Creditor, shall be barred from receiving a distribution in respect of such Claim and shall be barred from seeking payment of said Claim from the Debtor Companies, any director or officer of the Debtor Companies or any one of the Bonding Companies.

DATED at _____ this _____ day of _____.

(Signature of Witness)

(Signature of individual completing this form)

(Please print name)

(Please print name)