

INDIVIDUAL IDENTIFICATION INFORMATION RECORD
Information required by the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act.*

Vendor: **AMACON DEVELOPMENT (CITY CENTRE) CORP.**

Lot/Suite #: **1006** Phase/Tower: **TWO** Plan No.:

Street: in the of

Date of Offer: **October 16, 2012**

Sales Representative: **ALLEN V.**

Verification of Individual

1. Full Legal Name of Individual: **BALJIT K. KHAMBA**
2. Address: **1637 WESTBRIDGE WAY,
MISSISSAUGA, ONTARIO, L5N 7S9**
3. Date of Birth: **October 06, 1978**
4. Principal Business or Occupation: _____
5. Identification Document (must see original): _____
6. Document Identification Number: **K3168-07257-86006**
7. Issuing Jurisdiction: _____
8. Document Expiry Date (must not be expired): _____

NOTE: This section must be completed for each purchaser. If the individual refuses to provide information must make a record of same detailing what efforts were made to get such information.

Acceptable Identification Documents: birth certificate, driver's licence, passport, record of landing , permanent resident card, old age security card, certificate of Indian Status or SIN card (although SIN numbers are NOT to be provided to FINTRAC). If the identification is from a foreign jurisdiction should be equivalent to one of the above noted documents. Provincial health card NOT an acceptable form of identification.

Verification of Third Parties (if applicable)

Note: Must be completed with a client or unrepresented individual if acting on behalf of a third party. If you suspect the client is acting on behalf of a third party but cannot verify same you must keep record of that fact.

1. Name of third Party: _____
2. Address: _____
3. Date of Birth: _____
4. Principal Business or Occupation: _____
5. Incorporation number and place of issue (corporations/other entities only) _____
6. Relationship between third party and client: _____

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Sales Representative: **ALLEN V.**

Verification of Individual

1. Full Legal Name of Individual: **JASBIR K. VIRDI**
2. Address: **1637 WESTBRIDGE WAY,
MISSISSAUGA, ONTARIO, L5N 7S9**
3. Date of Birth: **September 18, 1963**
4. Principal Business or Occupation: _____
5. Identification Document (must see original): _____
6. Document Identification Number: **V4595-38856-35918**
7. Issuing Jurisdiction: _____
8. Document Expiry Date (must not be expired): _____


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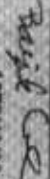
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Ontario
 Driver's Licence **ON**
 Permis de conduire **CANADA**

NAME: SOBI KHANNA,
BALJIT K
1637 WESTBRIDGE WAY
MISSISSAUGA, ON, L5N 7S9
K3168 - 07257 - 86006
2010/10/08
AV303867
2015/10/06
163 cm
1978/10/06
7217310

Oct 16, 2012

Alex V

