

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 #: **1819** Phase/Tower: **9 South** Plan No.:

Street: **4055-4085 Parkside Village Drive** in the City of **Mississauga**

Date of Offer: **April 19, 2015**

Sales Representative: **In2ition Realty**

Verification of Individual

- | | |
|-------------------------------------------------|----------------------------------------------------------|
| 1. Full Legal Name of Individual: | GURSATWINDER SINGH SANGHA |
| 2. Address: | 36 TREASURE DRIVE,
BRAMPTON, ONTARIO, L7A 3L1 |
| 3. Date of Birth: | October 27, 1983 |
| 4. Principal Business or Occupation: | <u>mechanic</u> |
| 5. Identification Document (must see original): | <u>driver's licence</u> |
| 6. Document Identification Number: | <u>S0422-30888-31027</u> |
| 7. Issuing Jurisdiction: | <u>ontario</u> |
| 8. Document Expiry Date (must not be expired): | <u>2019/10/27</u> |

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: | _____ |

Ontario Driver's Licence
Permis de conduire ON CANADA

1,2 NAME/NOM
SANGHA,
GURSATWINDER, SINGH
36 TREASURE DR
BRAMPTON, ON, L7A 3L1

4a NUMBER/
NUMERO S0422 - 30888 - 31027

4b ISS/DEL 2014/11/14 4b EXP/EXP 2019/10/27

5 DO/REF DA5466561 16 HGT/HAUT. 175 cm

15 SEX/SEXE M

9 CLASS/
CATEG. A

12 REST/
COND. ZX

DOB/ODN 1983/10/27

Signature: *G. Sangha*

Small photo of the license holder.

Verified
April 19th 2015
by *AM*

INDIVIDUAL IDENTIFICATION INFORMATION RECORD
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Lot/Suite #: **1819** Phase/Tower: **9 South** Plan No.:

Street: **4055-4085 Parkside Village Drive** in the City of **Mississauga**

Date of Offer: **April 19, 2015**

Sales Representative: **In2ition Realty**

Verification of Individual

- | | |
|-------------------------------------------------|----------------------------------------------------------|
| 1. Full Legal Name of Individual: | RAJINDER SINGH SANGHA |
| 2. Address: | 36 TREASURE DRIVE,
BRAMPTON, ONTARIO, L7A 3L1 |
| 3. Date of Birth: | January 18, 1975 |
| 4. Principal Business or Occupation: | <u>Entrepreneur</u> |
| 5. Identification Document (must see original): | <u>driver's licence -</u> |
| 6. Document Identification Number: | <u>S0422-63887-50118</u> |
| 7. Issuing Jurisdiction: | <u>Ontario</u> |
| 8. Document Expiry Date (must not be expired): | <u>25 2017/01/18</u> |

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)

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- | | |
|-------------------------------------------------------------------------------|-------|
| 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: | _____ |

Ontario Driver's Licence / Permis de conduire ON CANADA

1.2 NAME / NOM
SANGHA,
RAJINDER SINGH
36 TREASURE DRIVE
BRAMPTON, ON, L7A 3L1

4a NUMBER / NUMERO
S0422 - 63887 - 50118

4b ISS / DEL
2012/01/06

4c EXP / EXP
2017/01/18

5 DO / REF
CG0073967

16 HGT / HAUT
181 cm

15 SEX / SEXE
M

9 CLASS /
CATEG
A

12 REST /
COND
Z

DOB / DPN
1975/01/18

2004716

Rajinder Singh Sangha

S0422-63887-50118
1975/01/18
Rajinder Singh Sangha

Verified
April # 19th 2015
ZML