

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 #: **2707** Phase/Tower: **ONE** Plan No.:

Street: in the City of **Mississauga**

Date of Offer: **February 25, 2012**

Sales Representative: **BRITTNEY**

Verification of Individual

- | | |
|---|---|
| 1. Full Legal Name of Individual: | KULWANT KAUR DHILLON |
| 2. Address: | 15 FALSTAFF DR,
BRAMPTON, ONTARIO, L6Y 5J4 |
| 3. Date of Birth: | August 03, 1971 |
| 4. Principal Business or Occupation: | _____ |
| 5. Identification Document (must see original): | _____ |
| 6. Document Identification Number: | _____ |
| 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: | _____ |



Human Resources
Development Canada

Développement des
ressources humaines Canada

SOCIAL
INSURANCE
NUMBER

NUMÉRO
D'ASSURANCE
SOCIALE

506 693 910

KULWANT KAUR DHILLON

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Sales Representative: **BRITTNEY**

Verification of Individual

- | | |
|---|---|
| 1. Full Legal Name of Individual: | HARVINDER SINGH ATWAL |
| 2. Address: | 15 FALSTAFF DR,
BRAMPTON, ONTARIO, L6Y 5J4 |
| 3. Date of Birth: | June 07, 1975 |
| 4. Principal Business or Occupation: | _____ |
| 5. Identification Document (must see original): | _____ |
| 6. Document Identification Number: | <u>A8426-31787-50607</u> |
| 7. Issuing Jurisdiction: | _____ |
| 8. Document Expiry Date (must not be expired): | _____ |

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| 1. Name of third Party: | _____ |
| 2. Address: | _____ |
| 3. Date of Birth: | _____ |
| 4. Principal Business or Occupation: | _____ |
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Sales Representative: **BRITTNEY**

Verification of Individual

- | | |
|---|---|
| 1. Full Legal Name of Individual: | KHUSHWINDER SINGH NAGRA |
| 2. Address: | 15 FALSTAFF DR,
BRAMPTON, ONTARIO, L6Y 5J4 |
| 3. Date of Birth: | May 13, 1975 |
| 4. Principal Business or Occupation: | _____ |
| 5. Identification Document (must see original): | _____ |
| 6. Document Identification Number: | <u>N0156-43487-50513</u> |
| 7. Issuing Jurisdiction: | _____ |
| 8. Document Expiry Date (must not be expired): | _____ |


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| 2. Address: | _____ |
| 3. Date of Birth: | _____ |
| 4. Principal Business or Occupation: | _____ |
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| 6. Relationship between third party and client: | _____ |


Ontario
 Driver's Licence
 Permis de conduire

ON
 CANADA

1. NAME / NOM
 ATWAL,
 HARVINDER SINGH
 15 FALSTAFF DR
 BRAMPTON, ON, L6Y 5J4
 4. NUMBER /
 NUMERO
 A8426 - 31787 - 50607
 4b EXP / EXP.
 2011/05/24 2016/06/07
 4a ISS DEL
 CA4701228
 5 DO REF
 15 SEX / SEXE
 M
 9 CLASS /
 CATEG.
 A
 12 REST /
 COND.
 Z
 9457166
 1975/06/07
 1 DOB /
 1975/06/07
 16 HGT / HAUT.
 175 cm
 3426-31787-50607
 1975/06/07


Ontario
 Driver's Licence
 Permis de conduire

N0156-43487-50513
 NAGRA,
 KHUSHWINDER, SINGH
 16 FALSTAFF DR,
 BRAMPTON, ON
 L6Y 5J5
 DATE OF BIRTH / DATE DE NAISS.
 1975-05-13
 SEX / SEXE
 M
 162
 3928972
 CANADA
 CLASS / CATEGORIE
 A
 COND. / REST.
 Z
 END. / AUT.
 1975-05-13

Feb. 25. 2012

Suite. 2807 YK

