

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

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

Lot/Suite #: **815**      Phase/Tower: **9 South**      Plan No.:

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

Date of Offer: **October 10, 2015**

Sales Representative: **In2ition Realty**

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**Verification of Individual**

- |   |   |
|---|---|
| 1. Full Legal Name of Individual:               | <b>SUNNY LONGANI</b>  |
| 2. Address:                                     | <b>7099 BENJAMIN COURT,<br/>MISSISSAUGA, ONTARIO, L5W 0E1</b> |
| 3. Date of Birth:                               | <b>December 12, 1967</b>                                      |
| 4. Principal Business or Occupation:            | <u>Assistant Manager</u>                                      |
| 5. Identification Document (must see original): | <u>Driver's Licence</u>                                       |
| 6. Document Identification Number:              | <b><u>L6403-72706-71212</u></b>                               |
| 7. Issuing Jurisdiction:                        | <u>Ontario</u>  |
| 8. Document Expiry Date (must not be expired):  | <u>12/12/16</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.

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**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: **In2ition Realty**

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**Verification of Individual**

- |   |   |
|---|---|
| 1. Full Legal Name of Individual:               | <b>RAVEENA LONGANI</b>  |
| 2. Address:                                     | <b>7099 BENJAMIN COURT,<br/>MISSISSAUGA, ONTARIO, L5W 0E1</b> |
| 3. Date of Birth:                               | <b>June 16, 1968</b>  |
| 4. Principal Business or Occupation:            | <u>Personal Support Worker.</u>                               |
| 5. Identification Document (must see original): | <u>Drivers' Licence.</u>                                      |
| 6. Document Identification Number:              | <b><u>L6403-64206-85616</u></b>                               |
| 7. Issuing Jurisdiction:                        | <u>Ontario.</u>   |
| 8. Document Expiry Date (must not be expired):  | <u>2017/06/16.</u>  |

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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**



12 NAME/FON  
 LONGANI,  
 SUNNY

1 7099 BENJAMIN CRT  
 MISSISSAUGA, ON, L5W 0E1

14 NUMBER/  
 NUMERO  
**L6403 - 72706 - 71212**

15 ISS/DEL  
 2012/06/19

16 EXP/EXP  
 2016/12/12

18 HGT/HAUT 168 cm

5 SEX/SEXE M

6 DOB/REF

8 CLASS/  
 CLASSE G

9 CATEG


13 RESID/  
 COND

3723293

3 DOB/DOB  
 1967/12/12


Sunny Benjamin

Received by Anita  
 Oct 14/15

**Ontario**

**Driver's Licence**  
**Permis de conduire**

**ON**  
CANADA



12 NAME NOY  
LONGANI,  
RAVENA

3 7099 BENJAMIN CRT  
MISSISSAUGA, ON, L5W 0E1

44 NUMBER/  
NUMERO  
**L6403 - 64206 - 85616**

4a ISS/DEL 2012/06/18 4b EXP/EXP 2017/06/16


5 DO/REF CH7145239 16 HGT/HAUT 152 cm

15 SEX/SEXE F

8 CLASS/CLASSE G

18 PREST/ON

3 DOB/DOB 1968/06/16 3703996



4206-85616  
06/18  
06/16