

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 #: **1107** Phase/Tower: **9 North** Plan No.:

Street: in the City of **Mississauga**

Date of Offer: **February 14, 2016**

Sales Representative: **In2ition Realty**

Verification of Individual

- | | |
|---|---|
| 1. Full Legal Name of Individual: | ZHUO ER WEI |
| 2. Address: | 72 HUBNER AVE,
MARKHAM, ONTARIO, L6C 0R6 |
| 3. Date of Birth: | June 27, 1970 |
| 4. Principal Business or Occupation: | <u>FINANCE</u> |
| 5. Identification Document (must see original): | <u>Driver's licence</u> |
| 6. Document Identification Number: | <u>W2247-79637-00627</u> |
| 7. Issuing Jurisdiction: | <u>Ont</u> |
| 8. Document Expiry Date (must not be expired): | <u>2019/6/27</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: | _____ |

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 #: **1107** Phase/Tower: **9 North** Plan No.:

Street: in the City of **Mississauga**

Date of Offer: **February 14, 2016**

Sales Representative: **In2ition Realty**

Verification of Individual

1. Full Legal Name of Individual: **MIN HUA SHAO**
2. Address: **72 HUBNER AVE,
MARKHAM, ONTARIO, L6C 0R6**
3. Date of Birth: **April 25, 1972**
4. Principal Business or Occupation: Logistics
5. Identification Document (must see original): Driver's Licence
6. Document Identification Number: **S3206-55507-25425**
7. Issuing Jurisdiction: Ont
8. Document Expiry Date (must not be expired): 2019/4/25

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: _____

BNN #1107 (Arboretum)

14 Feb 16

Agent Hong Yang Living

Ontario Driver's Licence Permis de conduire ON CANADA

1,2 NAME/ NOM
SHAO,
MIN HUA
72 HUBNER AVE
MARKHAM, ON, L6C 0R6

4d NUMBER/ NUMERO
S3206 - 55507 - 25425

4a ISS/ DEL
2014/04/04

4b EXP/ EXP
2019/04/25

5 DD/ REF
CV9134323

15 SEX/ SEXE
F

9 CLASS/ CATEG
G

12 REST/ COND
X

3 DOB/ ODN
1972/04/25

Ontario Driver's Licence Permis de conduire ON CANADA

1,2 NAME/ NOM
WEI,
ZHUO, ER
72 HUBNER AVE
MARKHAM, ON, L6C 0R6

4d NUMBER/ NUMERO
W2247 - 79637 - 00627

4a ISS/ DEL
2014/06/23

4b EXP/ EXP
2019/06/27

5 DD/ REF
CX7917650

15 SEX/ SEXE
M

9 CLASS/ CATEG
G

12 REST/ COND
X

3 DOB/ ODN
1970/06/27

Human Resources Development Canada / Développement des ressources humaines Canada

SOCIAL INSURANCE NUMBER
531 057 909

NUMÉRO D'ASSURANCE SOCIALE
MIN HUA SHAO

Human Resources Development Canada / Développement des ressources humaines Canada

SOCIAL INSURANCE NUMBER
531 004 950

NUMÉRO D'ASSURANCE SOCIALE
ZHUOER WEI