NOTE: An Individual Identification Information Record is required by the Proceeds of Crime (Money Laundering) and Terrorist Financing Act. This Record must be completed whenever there is an act in respect to the purchase or sale of real estate. It is recommended that the Individual Identification Information Record be completed:

- (i) for a buyer when the offer is submitted and/or a deposit made, and
- (ii) for a seller when the seller accepts the offer.

Vendor: AMACON DEVELOPMENT (CITY CENTRE) CORP. Lot/Suite #: 1405 Phase/Tower: Voya A Plan No.:

Transaction Property Address: 4116 Parkside Village Drive in the City of Mississauga

Sales Representative/Broker: Parkside Village - Voya
Date Information Verified: TUNE 17, 2021

A. Verification of Individual

NOTE: One of Section A.1, A.2. or A.3 must be completed for your individual clients or unrepresented individuals that are not clients, but are parties to the transaction (e.g. unrepresented buyer/purchaser or seller/vendor). Where you are unable to identify an unrepresented individual, complete section A.4 and consider sending a Suspicious Transaction Report to FINTRAC if there are reasonable grounds to suspect that the transaction involves the proceeds of crime or terrorist activity. Where you are using an agent or mandatary to verify the identity of an individual, special process and caution needs to be used.

1. Full Legal Name of Individual:

Tohfa El-Zarad

2. Address:

3888 DUKE OF YORKApt 1622,

MISSISSAUGA, ONTARIO, L5B 4P5

3. Date of Birth:

May 28, 1974

4. Principal Business or Occupation:

Altocan Services Corp/Book keeper

A.1 Federal/Provincial/Territorial Government-Issued Photo ID

Ascertain the individual's identity by comparing the individual to their photo ID. The individual must be physically present.

Type of Identification Document (must see original):

Drivers License

Document Identification Number:

E56977460745528

3. Issuing Jurisdiction:

ONTARIO

4. Document Expiry Date (must not be expired):

August 29, 2023

A.2 Credit File

Ascertain the individual's identity by comparing the individual's name, date of birth and address information above to information in a Canadian credit file that has been in existence for at least three years. If any of the information does not match, you will need to use another method to ascertain client identity. Consult the credit file at the time you ascertain the individual's identity. The individual does not need to be physically present.

1.	Name of Canadian Credit Bureau Holding the Credit File:
2.	Reference Number of Credit File:
A.3	Dual ID Process Method
mur orig web pres	Verify the individual's name and date of birth by referring to a document or source containing the individual's name and of birth
	□ Name of Source:
	☐ Account Number**:
□ addr	Verify the individual's name and address by referring to a document or source containing the individual's name and
	□ Name of Source:
	□ Account Number**:
	erify the individuals' name and confirm a financial account*
	□ Name of Source:
	Financial Account Type:

{@File Name} 25May19 Lot No./Suite:1405 Project: AMACON DEVELOPMENT (CITY CENTRE) CORP.

☐ Account Number**:

** Or reference number if there is no account number.

A.4 Unrepresented Individual Reasonable Measures Record (if applicable) Only complete this section when you are unable to ascertain the identity of an unrepresented individual. 1. Measures taken to Ascertain Identity (check one): $\ \square$ Asked unrepresented individual for information to ascertain their identity ☐ Other, explain: _ Date on which above measures taken: 2. Reasons why measures were unsuccesful (check one): ☐ Unrepresented individual did not provide information ☐ Other, explain: B. Verification of Third Parties (if applicable) NOTE: Only complete Section B for your clients. Complete this section of the form to indicate whether a client is acting on behalf of a third party. Either B.1 or B.2 must be completed. **B.1 Third Party Reasonable Measures** Where you cannot determine whether there is a third party, complete this section. Is the transaction being conducted on behalf of a third party according to the client? (check one): ☐ Yes □ No Measures taken (check one): ☐ Asked if client was acting on behalf of a third party ☐ Other, explain: _ Date on which above measures taken: Reason why measures were unsuccessful (check one): ☐ Client did not provide information ☐ Other, explain: Indicate whether there are any other grounds to suspect a third party (check one): ☐ Yes, explain: _____ **B.2 Third Party Record** Where there is a third party, complete this section. 1. Name of third party: ___ 2. Address: 3. Date of Birth: 4. Nature of Principal Business or Occupation:

5. Incorporation number and place of issue (if applicable): ___

6. Relationship between third party and client:

NOTE: Only complete Sections C and D for your clients.

C. Client Risk (ask your Compliance Officer if this section is applicable)

Determine the level of risk of a money laundering or terrorist financing offence for this client by determining the appropriate cluster of client in your policies and procedures manual this client falls into and checking one of the checkboxes below:

Low Ki	SK
×	Canadian Citizen or Resident Physically Present
	Canadian Citizen or Resident Not Physically Present
	Canadian Citizen or Resident - High Crime Area - No Other Higher Risk Factors Evident
	Foreign Citizen or Resident that does not Operate in a High Risk Country (physically present or not)
	Other, explain:

Mediu	m Risk
	Explain below
High Ri	sk
	Foreign Citizen/Resident that operates in a High Risk Country (physically present or not)
	Other Explain

If you determined that the client's risk was high, tell your brokerage's Compliance Officer. They will want to consider this when conducting the overall brokerage risk assessment, which occurs every two years. It will also be relevant in completing Section D below. Note that your brokerage may have developed other clusters not listed above. If no cluster is appropriate, the agent will need to provide a risk assessment of the client, and explain their assessment, in the relevant space above.

D. Business Relationship (ask your Compliance Officer wh	en this section is applicable)			
D. 1. Purpose and Intended Nature of the Business Rel				
Check the appropriate boxes.	•			
Acting as an agent for the purchase or sale of:				
□ Residential property	A Residential property for income purposes			
□ Commercial property	□ Land for Commercial Use			
□ Other, please specify:				
D.2. Measures Taken to Monitor Business Up-To-Date	Relationship and Keep Client Information			
D.2.1. Ask the Client if their name, address or principal include the updated information on page one.	al business or occupation has changed and if it has			
D.2.2 Keep all relevant correspondence with the client on file in order to maintain a record of the information you have used to monitor the business relationship with the client. Optional - if you have taken measures beyond simply keeping correspondence on file, specify them here:				
D.2.3. If the client is high risk you must conduct enhanced measures you have applied:	anced measures to monitor the brokerage's business e. Optional - consult your Compliance Officer and			
On't forget, if you see something suspicious during the				

rget, if you see something suspicious during the transaction report it to your Compliance Officer. Consult your policies and procedures manual for more information.