

Unit #4209
(PSV 1)



2012/12/10

4/1/11

ServiceOntario.ca

C63829376

2e Catégorie de Véhicules
Corr Laines Vertes

(100) kg max.
ne dépasser pas

SS/CATÉGORIE :
véhicule léger (max. 4700 kg),
véhicule moyen (max. 4500 kg)
véhicule lourd (max. 4500 kg)
véhicule agricole
véhicule agricole
pour 4000 kg

BARCODE

2102/12/40 28

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 #: 4209 Phase/Tower: ONE Plan No.:

Street: in the City of Mississauga

Date of Offer: April 21, 2012

Sales Representative: Anthony

Verification of Individual

1. Full Legal Name of Individual: FATINA MORCOS
2. Address: 6861 GOLDEN HILLS WAY,
MISSISSAUGA, ONTARIO, L5W 1P3
3. Date of Birth: August 02, 1957
4. Principal Business or Occupation: Coordinator
5. Identification Document (must see original): Driver's Licence
6. Document Identification Number: M6568-25905-75802
7. Issuing Jurisdiction: Ontario
8. Document Expiry Date (must not be expired): 2016/08/08

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: _____