

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 #: **2201** Phase/Tower: **ONE** Plan No.:

Street: in the **City of Mississauga**

Date of Offer: **March 20, 2012**

Sales Representative:

Verification of Individual

- 1. Full Legal Name of Individual: **ZUHDI HATIM ZUHDI SHADID**
- 2. Address: **2487 CONFEDERATION PARKWAY,
MISSISSAUGA, ONTARIO, L5B 1S1**
- 3. Date of Birth: **October 14, 1972**
- 4. Principal Business or Occupation: unemployed.
- 5. Identification Document (must see original): Passport
- 6. Document Identification Number: **PASSPORT L563989**
- 7. Issuing Jurisdiction: _____
- 8. Document Expiry Date (must not be expired): Oct 30, 2016.

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: _____



Headquarters use only - Réservé à l'administration centrale

Bar code use only - Réservé au code-barres

B052263492
REPLACEMENT #1

CONFIRMATION OF PERMANENT RESIDENCE

CLIENT ID: 625089
DOC NO: T501007

SURNAME : SHADID
DATE OF BIRTH: 11/01/1972
SEX : M
PASSPORT NO : 1560999
FAMILY STATUS: J
14. ACCOMPANYING FAMILY MEMBERS:

GIVEN NAME : ZUHRI
PLACE OF BIRTH: TULKARM
MARITAL STATUS: 2
VALID UNTIL : 30/06/2016
HEIGHT : 1185

NONE FLAG :
COUNTRY OF BIRTH : JORDAN
CITIZEN OF : JORDAN
ENTRY OF ISS OF TRAVEL DOC :
EYE COLOUR : BROWN

HAVE YOU ANY DEPENDANTS OTHER THAN THOSE LISTED HERE? NO
15. FULL NAME ADDRESS AND RELATIONSHIP OF PERSON WILLING TO ASSIST:
NOMADID DINA ABDALLA AB
SPOUSE 16. 0111000
3515 KARIYA DR., #3705 17. 250
MISSISSAUGA 18. NO
ON 158 001 DEST: 3510

I CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:

DATE: 28 FEB 2012

19. FCI 20. 1 21. 1
22. 05 23. 1 24. 1
25. 16 26. 240 27. 1
28. 1 29. 07/DEC/2012

32. 16/JAN/2012 37.
33. 07/DEC/2012 38.
34. 01/1/2012 39.
40.

41. CARRIER/FLIGHT NO: KLM691

45. BECAME P.R. ON: 28 FEB 2012

42. MONEY IN POSSESSION:

46. BECAME P.R. AT: 3742

47. SIGNATURE OF IMM. OFFICER:

48. CONDITIONS: 00

49. REMARKS:

CIC FILE: 957062600925
YEARS OF SPONSORSHIP: 1

I UNDERSTAND THESE CONDITIONS:

NOT VALID FOR TRAVEL
NON VALIDE POUR VOYAGER