

**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 #: **201**      Phase/Tower: **1**      Plan No.:

Street: **4065 Brickstone Mews, Mississauga, ON** Suite # in the City of **Mississauga**

Date of Offer: **July 12, 2015**

Sales Representative: **In2ition Realty**

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**Verification of Individual**

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|---|--|
| 1. Full Legal Name of Individual:               | <b>JIANQING WANG</b>                                     |
| 2. Address:                                     | <b>684 SAVOY CRES,<br/>MISSISSAUGA, ONTARIO, L5R 3B3</b> |
| 3. Date of Birth:                               | <b>May 20, 1979</b>                                      |
| 4. Principal Business or Occupation:            | <u>Sales</u>   |
| 5. Identification Document (must see original): | <u>Driver's licence</u>                                  |
| 6. Document Identification Number:              | <b><u>W0418-40107-90520</u></b>                          |
| 7. Issuing Jurisdiction:                        | <u>ONT</u>   |
| 8. Document Expiry Date (must not be expired):  | <u>2020/05/30</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.

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|---|---------|
| 1. Name of third Party:   | <u></u> |
| 2. Address:   | <u></u> |
| 3. Date of Birth:   | <u></u> |
| 4. Principal Business or Occupation:  | <u></u> |
| 5. Incorporation number and place of issue (corporations/other entities only) | <u></u> |
| 6. Relationship between third party and client:                               | <u></u> |

Tower 1, unit 201

\$402,900

Plaza 15

**Ontario** Driver's Licence **ON**  
Permis de conduire CANADA

1.2 NAME / NOM  
WANG, JIANQING

8.684 SAVOY CRES  
MISSISSAUGA, ON, L5R 3B3

40. NUMBER /  
NUMERO **W0418 - 40107 - 90520**

4a. ISS / DEL 2015/06/02 4b. EXP / EXP. 2020/05/30

5. DOB / REF DE7370633 16. HGT / HAUT. 178 cm

15. SEX / SEXE M 9. CLASS /  
CATEG. G2

12. REST /  
COND.

3. DOB / DEN. 1979/05/20

