

PSV #310

DW, JAN 12, 2017

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



1.2 NAME / NOM
**CHEN,
LI YAN**

8. ADDRESS / ADRESSE
**45-5650 WINSTON CHURCHILL BL
MISSISSAUGA, ON, L5M0L8**

4a. NUMBER / NUMERO
C3344 - 46796 - 35825

4b. ISS / DEL
2014/05/21

4b EXP. / EXP.
2019/08/25

6. DO / REF
CX4909643

16 HGT / HAUT.
170 cm

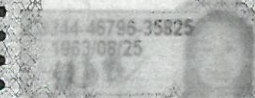
10 SEX / SEXE
F

9 CLASS / CATEG
G

12 REST / COND
1963/08/25







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

Street: 4011 Brickstone Mews in the City of Mississauga

Date of Offer: January 12, 2017

Sales Representative: In2ition Realty

Verification of Individual

1. Full Legal Name of Individual:

LI YAN CHEN

2. Address:

5650 WINSTON CHURCHILL BL Apt 45,
MISSISSAUGA, ONTARIO, L5M 0L8

3. Date of Birth:

August 25, 1963

4. Principal Business or Occupation:

Group term leader
Data Group (Printing Co)
Driver's licence

5. Identification Document (must see original):

6. Document Identification Number:

C3344-46796-35825

7. Issuing Jurisdiction:

Ont

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

2019/08/25

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: