OREA Ontario Real Estate Association

Individual Identification Information Record

Form 630 for use in the Province of Ontario

	tom to the second secon
t is recommended that it is recommended that it	cord is required by the <i>Proceeds of Crime (Money Laundering) and Terrorist Financing Act</i> . This Record must in Information Record be completed:
It is recommended that the Individual Identificatio (I) for a buyer when the offer is submitted.	n information Record he completed
''/ 'U' 4 DUYER When the offer is not to be	and an antibiologic
Missis	Sauga ON
Sales Representative/Broker Name: In	2ition Realty
Date Information Verified/Credit File Co	Pisulfed:
A Martin	uare One Drive, sauga, ON 2ition Realty Praulted:
A. verification of Individua	al
NOTE: One of Section 4 4 4 4	
(e.g. unrepresented buyer or seller). When you	ipleted for your individual clients or unrepresented individuals that are not clients, but are parties to the transaction individual, complete section A.4 and consider sending a Suspicious of an individual, see proceeding the transaction involves the proceeds of crime or terrories and in a Suspicious of an individual, see proceeding the proceeds of crime or terrories and the proceeding of the proceeding o
Transaction Report to FINTRAC If there are reported	e unable to identify an unverse ented individuals that are not clients, but are parties to the transaction and identify an unverse ented individual, complete section A.4 and consider sending a Suspicious of an individual, see procedure described in CREA's materials on REALTOR Links.
AND MAIN AND MARKET	A - 1 D - 1 D - 1 D - 1 D - 1 D D D D D D
1. Full legal name of individual. At 12	of an individual, see procedure described in CREA's materials on REALTOR Link*. Promencial
2. Address: 7221 Danton	DISCOUZA THEALTH LINKS
Mississauga	A) / CITCHE
3. Date of Birth: July 30 197	3.00., Lan 505
4. Nature of Principal Business or Occur	Median Day of the second secon
A.1 Federal/Provincial/Territor	Promencial
Ascertain the individuals to the	rial Government-Issued Photo ID
1. Type of Identificant	the individual to their photo iD. The individual must be physically present.
2. Document Identification Document':	DOLLAR S. Ine individual must be physically present.
3. Issuing Jurisdiction	Tres pe organal and have a phaso assects Ala FINTHAC meterials of REAL 1971
4. Document Combined to the state of the sta	Cinkip for examples)
	ROMINGS TOPPAGE TO THE STATE OF
- Date:	Boulhos, Jarrhory Edreign Jurisdiction or "Canada") Country: Country:
A.2 Credit File	(must be valld and not expired)
A.2 Credit File Ascertain the individual's identity by	Country: Conscion Jurisoletion or "Canada") Country: Conscion
Consult the credit file at the time you are years.	If any of the information does not make here.
Consult the credit file at the time you ascertain the 1. Name of Canadian Canadian	If any of the information does not match, you will need to use another method to ascertain client thanks. If any of the information does not match, you will need to use another method to ascertain client thanks.
Consult the credit file at the time you ascertain the 1. Name of Canadian Credit Bureau Hole	If any of the information does not match, you will need to use another method to ascertain client identity. If any of the information does not match, you will need to use another method to ascertain client identity. If any of the Create stars.
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Consult the credit file at the time you ascertain the Indian of Canadian Credit Bureau Hole 2. Reference Number of Credit File: A.3 Dual ID Process Method	If any of the Information does not match, you will need to use another method to ascertain client identity. If any of the Information does not match, you will need to use another method to ascertain client identity. If any of the Information in a Canadian credit file individual's identity. The individual does not need to be physically present.
Consult the credit file at the time you ascertain the sons of Canadian Credit Bureau Hole 2. Reference Number of Credit File: A.3 Dual ID Process Method 3. Complete two of the following three checkboxes	If any of the Information does not match, you will need to use another method to ascertain client identity. If any of the Information does not match, you will need to use another method to ascertain client identity. If any of the Information in a Canadian credit file individual's identity. The individual does not need to be physically present.
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Consult the credit file at the time you ascertain the source of Canadian Credit Bureau Hole 1. Name of Canadian Credit Bureau Hole 2. Reference Number of Credit File: A.3 Dual ID Process Method 1. Complete two of the following three checkboxes cource must be well known and reputable (e.g., feer website). Documents cannot be photocopied, faxed verify the individual's name and date of Name of Source: Account Number**: 1. Verify the individual's name and address on Name of Source: Account Number**: 2. Verify the individual's name and confirm on Name of Source: Account Number**:	If any of the Information does not match, you will need to use another method to ascertain client identity. If any of the Information does not match, you will need to use another method to ascertain client identity. If any of the Information does not match, you will need to use another method to ascertain client identity. If any of the Information does not need to be physically present. If any of the Information in a Canadian credit file individual's identity. If any of the Information in a Canadian credit file individual in the independent identity. If any of the Information in a Canadian credit file individual present. If any of the Information in a Canadian credit file individual in the independent in ascertain client identity. If any of the Information in a Canadian credit file individual present. If any of the Information in a Canadian credit file individual present. If any of the Information in ascertain client individual individual can entitle individual indi
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Consult the credit file at the time you ascertain the source in the credit file at the time you ascertain the source in the consult the credit file at the time you ascertain the source in the consultation of Canadian Credit Bureau Hole 2. Reference Number of Credit File: A.3 Dual ID Process Method 1. Complete two of the following three checkboxes cource must be well known and reputable (e.g., feel to be consultationally in the checkboxes cource). Any document must be an original paper providers). Any document must be an original paper providers. Account number in the consultation of cource: Account Number in the consultation of the cource in the course in the cource in the cource in the course in the course in the course in the cource in the course in the cour	If any of the information does not match, you will need to use another method to ascertain client identity. It individual does not need to be physically present. If any of the information does not match, you will need to use another method to ascertain client identity. It is individual does not need to be physically present. If any of the information in a Canadian credit file individual's identity. The individual does not need to be physically present. If any of the individual's identity by referring to information in two independent, reliable, sources. Each or original electronic document (e.g., the individual can email you electronic documents downloaded from a digitally scanned. The individual does not need to be physically present. In a financial and not expired must be recent if no expiry date) If the individual is name and address* If the individual is name and address* If the individual is name and address* If it is a financial account*
Consult the credit file at the time you ascertain the source in the credit file at the time you ascertain the source in the consult the credit file at the time you ascertain the source in the consult in the source in the consult in the source in the sour	ding the Credit File: S by ascertaining the individual's identity by referring to information in two independent, reliable, sources. Each derail, provincial, territorial and municipal levels of government, crown corporations, financial entities or utility or or original electronic document (e.g., the individual can email you electronic documents downloaded from birth by referring to a document or source containing the individual's name and date of birth (must be valid and not expired; must be recent if no expiry date) S by referring to a document or source containing the individual's name and address*





Form 630 for use in the Province of Ontario

Only co	Inrepresented Individual Reasonable Measures Record (if applicable)
-	mplete this section when you are unable to ascertain the identity of an unrepresented individual.
	The survey of th
	☐ 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):
	my measures were unsuccessful (check and).
	☐ Unrepresented individual did not provide information
B. V	erification of Third Parties
	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
RIT	Tabled ID
Where v	hird Party Reasonable Measures
•	a destining whether there is a third party complete to
19 fill® i	transaction being conducted on behalf of a third party according to the client? (check one):
	I Yes (check one):
	Tes taken (check one): Asked if client was acting on behalf of a third party Other, explain: N which above measures taken:
Date or	n which above measures taken: n why measures were unsuccessful (check one)
Paga	
C LASTSOI	n why measures were unsuccessful (check one): 1 Client did not provide information 1 Other, explain:
Indian	while at
	Other, explain: Whether there are any other grounds to suspect a third party (check one):
_	ios, explain:
B.2 T	l Yes, explain:
Where th	ere is a third party, complete this section.
1. Nam	A of third master.
2. Addr	888:
Dete	e of third party: ess: of Birth: re of Principal Business or Occupation:
** 1401001	is of Principal Business or Occupation:
	peration number and place of issue (if applicable)
	7
3. Relat	Sonship between third party and client:









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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 Risk	Allent falls into and checking one of the checkboxes below:
Canadian Citizen or Resident	
Canadian Citizen of Resident	Physically Present
☐ Canadian Citizen or Resident	Not Physically Present
☐ Foreign Citizen or Besident	t – High Crime Area – No Other Higher Risk Factors Evident
Other, explain:	hat does not Operate in a High Risk Country (physically present or not)
	b day present or not)
Medium Risk	
☐ Explain:	
High Risk	
☐ Foreign Citizen or Resident th	
Other, explain:	at operates in a High Risk Country (physically present or not)
_	

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 will need to provide a risk assessment of the client, and explain their assessment, in the relevant space above.







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D. Business Relationship	
(ask your Compliance Officered	
(ask your Compliance Officer who	en this section is applicable)
D.1. Purpose and Intended Nat	ture of the Business Relationship
Check the appropriate boxes.	are of the Business Relationship
Acting as an agent for the purchase or sale	n of
E Residential property	
☐ Commercial property	Residential property for income purposes
☐ Other, please specify:	☐ Land for Commercial Use
	Land for Commercial Use
U.Z. Measures Taken to Monte	AN Distance of the Control of the Co
D.2.1. Ask the Client If their name, address	or principal business or occupation has changed and if it has include the updated
D 2 2 Keep - "	or principal business or occupation has changed and if it has include the updated
the business relationship with the elect.	th the client on file in order to maintain a record of the information you have used to monitor
them here:	th the client on file in order to maintain a record of the information you have used to monitor ptional - if you have taken measures beyond simply keeping correspondence on file, specify
D.2.3. If the client is high risk you must see	educt enhanced measures to monitor the brokerage's business relationship and keep their
client information up to date. Optional - cor	rout enhanced measures to monitor the brokerage's business relationable
	duct enhanced measures to monitor the brokerage's business relationship and keep their nsult your Compliance Officer and document what enhanced measures you have applied:
	applied,
D 3 Suppleious =	
D.3 Suspicious Transactions	
procedures manual for more information	us during the transaction report it to your Compliance Officer. Consult your policies and
more information.	ompliance Officer. Consult your policies and







Form 630 for use in the Province of Ontario

1.00 1.10	
el e	OTE: An Individual Identification Information Record is required by the <i>Proceeds of Crime (Money Laundering)</i> and Terrorist Financing Act. This Record must is recommended that the individual Identification Information Record by Completed.
101	Displayed by the REALTOR® member whenever they act in respect to the purchase or sale of real estate. (I) for a building information Record is required by the Proceeds of Crime (Money Laundering) and Terrorist Financing Act. This Record must
76	Is recommended that the individual identification information Record be completed: (I) for a buyer when the offer is submitted early and respect to the purchase or sale of real estate.
	(i) for a puyer when the offer is submitted to
	(ii) for a seller when the seller accepts the offer.
Ti	
٠,	ransaction Property Address: 430 Square One Drive, Mississauga, ON ales Representative/Broker Name: In2ition Realty ate Information Verified/Credit File Consulted:
S	ales Representative/Protect No. 19744 - P
D	ate Information Verified/Condition Realty
	Mississauga, ON ales Representative/Broker Name: In2ition Realty ate Information Verified/Credit File Consulted: Verification of Individual
Δ	Varification of Laws
N	OTE: 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 Report to FINTRAC if there are reasonable grounds to suspect that the transaction appear or mandature of the transaction and appear or mandature or mandatu
(0.	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 Report to FINTRAC if there are reasonable grounds to suspect that transaction and account or mandatary to verify the identity of an individual, see parties that transaction involves the proceeds of crime or target that the proceeds of the proceeds of crime or target that the proceeds of the proceeds
Tr	ansaction Report to FINTRAC if there you are unable to identify an unrepresented individuals that are not clients, but are parties to the 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 individual, see procedure described in CREA's materials on REALTOR Links.
US	ing an agent or mandatary to verify the identity of an individual, see procedure described in CREA's materials on REALTOR Link. Address:
2.	Address: 722 Survey of the Address o
•	Full legal name of individual: Clarence C D DOUZO Address: 7,3-2-1 Double Service C D DOUZO Prometocle C D DOUZO Description of individual: Prometocle C D DOUZO Description of individual D DOUZO Description
3.	Address: 722/ Denton Promercice Date of Birth: December 18 1967 Nature of Principal Business or Occupation: Travel Consultant - Hent Travel 1 Federal/Provincial/Territorial Government Insural Establishment
4.	Nature of Principal Rusiness of O.
_	Towel Consultant
A	1 Federal/Provincial/Torritorial 6
1	Type of Identification Document: Document Identification Pocument: Comparing the individual to their photo ID. The Individual must be physically present.
2	Type of identification Document': The individual must be physically present
3.	leasting hand a sumber: Small sumber: Small subject to the subject
4.	Document War of examples)
	Country: Country:
A	2 Credit File (must be valid and not expired)
A	Type of identification Document': Document identifier Number: Street in the individual must be physically present. Document identifier Number: Street in the individual must be physically present. Document Expiry Date: Street in the individual's identify by comparing the individual to their photo ID. The individual must be physically present. Country: Count
rts th:	certain the Individual's identity by comparing the individual's name, date of birth and address information above to information in a Canadian credit file insult the credit file at the time you ascertain the individual's identity. The individual does not match, you will need to use another method to ascertain the individual's identity. The individual does not match, you will need to use another method to ascertain the individual's identity. The individual does not match, you will need to use another method to ascertain the individual's identity.
Co	at has been in existence for at least three years, if any of the information above to information above to information
	mount the credit file at the time you ascertain the individual's identity. The last the time you will need to use another method to a Canadian credit file
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	The state of the s
2,	Reference Number of Credit File: .3 Dual ID Process Method
A	A.B. Tan
A	Y PAGI ID Process Made
30	Cemplete two of the following three checkboxes by ascertaining the individual's identity by referring to information in two independent, reliable, sources, Eapviders). Any document must be an original paper or original electronic document (e.g., the individual can email you electronic document (e.g., the individual can email you electronic document (e.g., the individual can email you electronic documents or utilities or utilities.
orc	viders). Any document must be an original paper or original electronic document (e.g., the individual can email you electronic documents cannot be photocopied, faxed or digitally scanned. The individual does not need to be physically present. Verify the individual's name and date of birth beyond.
	besite). Documents cannot be photocopied, faxed or digitally scanned. The individual does not need to be physically present. Verify the individual's name and date of birth by referring to a document or source containing the individual's name and date of birth by referring to a document or source containing the individual's name and date of birth by referring to a document or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual's name and date of birth or source containing the individual or source
	O Name of a
	O Account Number of Source Containing the individual's name and data of him
	unusi be valid and not expired: must be recent if no expiry date)
]	O Name of Source: (must be valid and not expired: must be recent if no expire date) Verify the individual's name and address by referring to a document or source containing the individual's name and address by referring to a document or source containing the individual's name and address* O Name of Source: (must be valid and not expired: must be recent if no expire date)
	Name of Source:
	Account Number**: (must be valid and not expired; must be really and not expired; must be real
3	O Name of Source: O Account Number**: (must be valid and not expired: must be recent if no expiry date) Verify the individuals' name and confirm a financial account*
	O Financial Approximation of the Control of the Con
	O Account Numbered
Se	e CREA's FINITO AC medal 1
Se	Financial Account Type: Account Number**: CREA's FINTRAC materials on REALTOR Link® for examples. ** Or reference number if there is no account number. This document has been prepared to





Form 630 for use in the Province of Ontario

0-1	Unrepresented Individual Reasonable Moo
Uniy	Unrepresented Individual Reasonable Measures Record (if applicable) 1. Measures taken to Assertal the Identity of an unrepresented individual.
	Other, explain:
	Other, explain: Date on which above measures taken: 2. Reasons why measures taken:
	2. Reasons why measures were unsuccesful (check and)
	Other explain:
B. 1	/erification of Third Parties
рагту.	: 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
Where	you cannot determine whether there is a third party.
ls the	transaction being conducted on behalf of a third party according to the client? (check one):
	Yes Yes
	□ No
	ures taken (check one): Asked if client was acting on behalf of a third party Other, explain:
Date	on which shows macoured
	measures taken;
Reas	On why measures were unsuccessful (check one)
lmalta.	And the state of t
make	Other, explain: Description of provide information Other, explain: Other, explai
	Cl Yes, explain:
Ro.	Yes, explain:
Where	Third Party Record
	there is a third party, complete this section.
1. Nat 2. Add	ne of third party:

3. Dat	Prese:
i. Inc	Moralian musha
	· · · · · · · · · · · · · · · · · · ·
	Minimals 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	rtionship between third party and client:







Form 630 for use in the Province of Ontario

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 Risk	one of the checkboxes below:
Canadian Citiz	en or Resident Physically Present
Li Canadian Citiz	en or Resident Not Physically Branch
Li Canadian Citiz	en or Resident - High Crime Area N
☐ Foreign Citizer	n or Resident that does not Operate in a High Risk Country (physically present or not)
Other, explain:	(physically present or not)
Medium Risk	
□ Explain:	
Llieb Div	
High Risk	
Li Foreign Citizen	or Resident that operates in a High Risk Country (physically present or not)
U Other, explain:	(physically present or not)

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 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.







Form 630 for use In the Province of Ontario

D. Business Relationship	
ask your Compliance Officer wh	hen this section is applicable)
	•
Check the appropriate boxes.	ture of the Business Relationship
Acting as an agent for the purchase or sa	ile of:
12 Residential property	☐ Residential property for income purposes
☐ Commercial property	☐ Land for Commercial Use
Other, please specify:	
D.O. 14	
D.2. Measures Taken to Monit	tor Business Relationship and Keep Client Information Up-To-Date
J.2.1. Ask the Client if their name, address information on page one.	s or principal business or occupation has changed and if it has include the updated
D.2.2 Keen all relevant company	
the business relationship with the client.	with the client on file in order to maintain a record of the information you have used to monito Optional - if you have taken measures beyond simply keeping correspondence on file, spec
and the form	simply keeping correspondence on file, speci
1	
D.2.3. If the client is high risk you must co	onduct enhanced measures to monitor the brokerage's business relationship and keep their
- c	onduct enhanced measures to monitor the brokerage's business relationship and keep their consult your Compliance Officer and document what enhanced measures you have applied:
	- The state applied.
D.3 Suspicious Transactions	
Don't forget, if you see something suspic	cious during the transaction report it to your Compilance Officer. Consult your policies and
procedures manual for more information	i.





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 #: 910 Phase/Tower: Avia 1 Plan No.:			
Street: 430 Square One Dr. in the City of Mississ	auga		
Date of Offer: March 31, 2019			
Sales Representative: In2ition Realty			
Verification of Individual			
1. Full Legal Name of Individual:	CLARENCE C D'SOUZA		
2. Address:	7221 DANTON PROMENADE , MISSISSAUGA, ONTARIO, L5N 5C5		
3. Date of Birth:	December 18, 1967		
4. Principal Business or Occupation:	/		
5. Identification Document (must see original):			
6. Document Identification Number:	D8052-12726-71218		
7. Issuing Jurisdiction:			
8. Document Expiry Date (must not be expired):	December 18, 2022		
NOTE: This section must be completed for each purecord of same detailing what efforts were made to	rchaser. If the individual refuses to provide information must make a get such information.		
card, old age security card, certificate of Indian Stat	ate, driver's licence, passport, record of landing, permanent resident tus or SIN card (although SIN numbers are NOT to be provided to urisdiction should be equivalent to one of the above noted documents. dentification.		
Verification of Third Parties (if applicable)			
Note: Must be completed with a client or unreprese client is acting on behalf of a third party but cannot	nted individual if acting on behalf of a third party. If you suspect the 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 (corpo	rations/other entities only)		
6. Relationship between third party and client:			

Lot No./Suite:910 Plan No.: Site:THE RESIDENCES AT PARKSIDE VILLAGE Avia 1

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 #: 910 Phase/Tower: Avia 1 Pla	n No.:		
Street: 430 Square One Dr. in the City of Mississ	auga		
Date of Offer: March 31, 2019			
Sales Representative: In2ition Realty			
Verification of Individual			
1. Full Legal Name of Individual:	ANEETA D'SOUZA		
2. Address:	7221 DANTON PROMENADE , MISSISSAUGA, ONTARIO, L5N 5C5		
3. Date of Birth:	July 30, 1973		
4. Principal Business or Occupation:	/		
5. Identification Document (must see original):			
6. Document Identification Number:	D8052-04307-35730		
7. Issuing Jurisdiction:			
8. Document Expiry Date (must not be expired):	July 30, 2019		
NOTE: This section must be completed for each purecord of same detailing what efforts were made to	rchaser. If the individual refuses to provide information must make a 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 unrepress client is acting on behalf of a third party but cannot	ented individual if acting on behalf of a third party. If you suspect the 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 (corpo	orations/other entities only)		
6. Relationship between third party and client:			

Lot No./Suite:910 Plan No.: Site:THE RESIDENCES AT PARKSIDE VILLAGE Avia 1