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INDIVIDUAL IDENTIFICATION INFORMATION RECORD

NOTE: An Individual Identification Information Record is required by the Proceeds of Crime (Money Laundering) and Terrorist Financing Act. This Record must be completed by the REALTORs member whenever they act in respect to the purchase or sale of real estate It is recommended that the Individual Identification Information Record be completed:

- (i) for a buyer when the offer is submitted and/or a deposit made, and
- (ii) for a seller when the seller accepts the offer.

Vendor: AMACON DEVELOPMENT (CITY CENTRE) CORP. Lot/Suite #: 1210 Phase/Tower: Voya A Plan No.:

Transaction Property Address:4116 Parkside Village Drive in the City of Mississauga Sales Representative/Broker Name: June 17 2021. **Date Information Verified:**

A. Verification of Individual

NOTE: 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 (e.g. unrepresented buyer or seller). Where you are unable to identify an unrepresented individual, complete section A.4 and consider sending a Suspicious 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 using an agent or mandatary to verify the identity of an individual, see procedure described in CREA's materials on REALTOR Link*.

1. Full legal name of individual: ZAHRA AL-KAZWINI 3185 TRAILSIDE DR 2. Address:

OAKVILLE, ONTARIO, L6M 0P3

3. Date of Birth: **April 28, 1988**

4. Nature of Principal Business or Occupation: Corona Gulf Corporation/Manager of Civil and Architechural

Department

A.1 Federal/Provincial/Territorial Government-Issued Photo ID

Ascertain the individual's identity by comparing the individual to their photo ID. The individual must be physically present unless using technology capable of assessing a government-issued photo identification document's authenticity.

1. Type of Identification Document*: **Drivers License** 2. Document Identifier Number: A54127920885428

ONTARIO Country: Canada 3. Issuing Jurisdiction:

4. Document Expiry Date: April 28, 2024

A.2 Credit File

Ascertain the individual's identity by comparing the individual's name, date of birth and address information above to information in a Canadian credit file that has been in existence for at least three years and is derived from more than one source. If any of the information does not match, you will need to use another method to ascertain client identity. Consult the credit file at the time you ascertain the individual's identity. The individual does not need to be physically present.

Reference Number of Credit File		

A.3 Dual ID Process Method

information provincial, individual de □ Confirm t	olete two of the following three checkboxes by ascertaining the individual's identity by referring to in two independent, reliable, sources. Each source must be well known and reputable (e.g., federal, territorial and municipal levels of government, crown corporations, financial entities or utility providers). The best not need to be physically present. The individual's name and date of birth by referring to a document or source containing the individual's name of birth*
O	Name of Source:
O	Account Number**:
☐ Confirm t	he individual's name and address by referring to a document or source containing the individual's name and
O	Name of Source:
O	Account Number**:
	he individuals' name and confirm a financial account* Name of Source:
	Financial Account Type:
	Account Number**:
	FINTRAC materials on REALTOR Link® for examples. ** Or reference number if there is no account number.
only complete	esented Individual Reasonable Measures Record (if applicable) e this section when you are unable to ascertain the identity of an unrepresented individual. sures taken to Ascertain Identity (check one):
	•
	d unrepresented individual for information to ascertain their identity
□ Othe	r, explain:
Date or	n which above measures taken:
2. Reas	ons why measures were unsuccesful (check one):
□ Unre	presented individual did not provide information
□ Othe	r, explain:

B. Verification of Third Parties

NOTE: Only complete Section B for your clients. Take reasonable measures to determine whether your clients are acting on behalf of third parties by completing this section of the form. If you are not able to determine whether your clients are acting on behalf of a third party but there are reasonable grounds to suspect there are, complete Section B.1. If there is a third party, complete Section B.2.

B.1 Third Party Reasonable Measures

the transaction being conducted on behalf of a third party according to the client? (check one): Yes No				
Describe why you think your client may be acting on behalf a third party:				
Third Party Record				
nere there is a third party, complete this section.				
Name of other entity:				
Address:				
Telephone number:				
Date of Birth (if applicable):				
Nature of Principal Business or Occupation:				
Registration or incorporation number, and jurisdiction and country that issued that number (if applicable				
Relationship between third party and client:				

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 Rish					
	Canadian Citizen or Resident Physically Present				
	Canadian Citizen or Resident Not Physically Present				
	Canadian Citizen or Resident - High Crime Area - No Other Higher Risk Factors Evident				
	Foreign Citizen or Resident that does not Operate in a High Risk Country (physically present or not)				
	Other, explain:				
Mediun	n Risk				
	Explain				
High Ris	k				
	Foreign Citizen/Resident that operates in a High Risk Country (physically present or not)				
	Other Explain				
	Cuter Explain				

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 D 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.

D. Business Relationship (ask your Compliance	Officer when this section is applicable)
D. 1. Purpose and Intended Nature of the Bus	siness Relationship
Check the appropriate boxes.	
Acting as an agent for the purchase or sale of:	
□ Residential property	Residential property for income purposes
□ Commercial property	Land for Commercial Use
□ Other, please specify:	
Optional: describe your business dealings with the c anticipate the types of transactions and activities tha	
D.2. Measures Taken to Monitor B Up-To-Date	usiness Relationship and Keep Client Information
D.2.1. Ask the Client if their name, address include the updated information on page one.	or principal business or occupation has changed and if it has
	the client on file in order to maintain a record of the iness relationship with the client. Optional - if you have taken a file, specify them here:
D.2.3. If the client is high risk you must co	onduct enhanced measures to monitor the brokerage's business
	up to date. Optional - consult your Compliance Officer and
document what enhanced measures you have applied	
D.3 Suspicious Transactions	
	during the transaction report it to your Compliance Officer.
Consult your policies and procedures manual for mo	ore information.

E. Terrorist Property Reports

Don't forget to follow your brokerage's procedures with respect to terrorist property reports. Consult your policies and procedures manual for more information.