



NOVA SCOTIA
BARRISTERS' SOCIETY

Client Verification Form

(For use where the client or the third party is an individual):

Client:

- Name: _____

- Address: _____

- Phone No: _____
- Business Address: _____

- Business Phone No: _____
- Occupation(s) _____

Original Document Reviewed - Copy Attached

- Driver's Licence
- Birth Certificate
- Passport
- Other(specify) _____

Date Identity Verified: _____

Identity Verified By: (name and title) _____

Date File Reviewed by Lawyer: _____

Name of Lawyer: _____