# ICB AMCL UNIT FUND Asset Manager: ICB Asset Management Co. Ltd.

(A Subsidiary of ICB)

# **APPLICATION FORM TO PURCHASE UNITS**

To be filled in by Issuing Office

То	Sale Day: (Date of Issue:)	Selling Agent's Code:		
	Registration No.	Registration No.		
Issuing Office Stamp	Sale Number:	Sale Number:		
Certificate Number(s):				
		Signature of the Officer with date		
	To be filled in by the applicant	Dated:		
(Please write clearly and delete v	vords not applicable)			
	(Taka			
	) * Cash/Cheque/P.O./D.D.No			
	ch and request you to sell to me			
	per unit (Prevailing on the			
	nits and my/our Registration Number is			
	ad and understood the terms and conditions of the			
agreed to be bound and governed by th	ne same on availing/using any facility. I/We further	agree not to hold the Fund liable for any conse		
Manager of any changes to the informa	entioned particulars being false, incorrect or inco- tion provided herein below and agree and accept			
or responsible for any loss.  All payments in connection with or arisin	ng out of the Units hereby applied for shall be pay	able in Bangladeshi Taka only including incom		
distribution and/or re-purchase price. In	/We do hereby undertake that I/We and my/our	heirs will not at any time or in any shape clair		
	oceeds of these Units and income accrued therec d for the purchase certificates of ICB AMCL Uni			
indirectly in illegal way.				
	BLOCK LETTERS PLEASE			
Particulars	Principal Holder	Joint Holder (if any)		
Name :				
Father's Name :				
Mother's Name :				
Spouse's Name :				
Occupation :				
Nationality:				
Date of Birth :				
NID No./ PP No./ Birth Certificate No.				
e-Tin Certificate No. :				
Present Address :	***************************************	<del></del>		
Permanent/Registered Address:				
Telephone/Cell No:				
Email:				
Source of Fund:				
Bank Details of Principal Holder				
Account No	Bank			
Branch		. Routing No		

\* Purchasers sending Application by post should leave this space blank for completion by the Issuing Office on Sale Day subject to refund of unadjusted portion of the remittance.

## Nominee(s), if any

Photograph of Nominee(s) (Attested by Principal Holder)	Name and Address of Nominee	Date of Birth	Relation with Principal Holder	Signature of Nominee

## \*\*TERMS & CONDITIONS

- Units shall be sold through ICB AMCL Head Office and Authorized Selling Agents on all working days except Thursday and Book closer period declare by office. The acceptance of any application shall be delayed until the realization of any Cheque enclosed with it. As the clearance of Cheques drawn on banks in towns other than that of the Issuing Office may take a long time, the applicants are advised to send a Bank Draft or a Pay Order.
- 2. Cheques, Pay Orders and Bank Drafts should be crossed and made payable to the ICB AMCL Unit Fund.
- 3. Application for units shall be made for minimum of 20 (Twenty) Units.
- Registration Number is issued to the Unit Holders. The existing Unit Holder is required to mention the previous Registration Number on the specified column of the Application Form when he intends to buy more units. More than one Registration Number is not issued to the same Unit Holder. Upon Registration of a sale, Unit Holders shall be issued with Unit Certificates. The certificates are available in denomination(s) of 1, 5, 10, 20, 50, 100, 250, 500,1000 and 5000 Units. The fewest possible number of Certificates shall be issued against each application.
- Units shall be registered in the name(s) of the Applicant(s), Joint Holders shall be registered provided that Application Form is duly completed and signed by all Joint Holders or both Signatory (in case of Institution). Dividend and any other payment/benefits (if any) shall be issued in favour of Principal Holder only. In case of the death of any of the Joint Holders, only the survivor shall be recognized as having any title to the Units. But absolutely on death of the Principal Holder as well as both the Joint Holders the units and entitlements shall bestow upon the Nominee(s) if any mentioned in the Form.
- Application(s) by Charitable Organization/Provident Fund/Trust Fund must be accompanied by the relevant documents authorizing investment in Units such as Memorandum and Articles of the Company, Bye-Laws of the Society, a Resolution by the Management Body and Power of Attorney in favor of the person(s) signing the Application(s).
- nulative Investment Plan (CIP): Under this scheme. Unit Holder might reinvest dividend income accrued thereon for purchasing

Purchase of Units un Documents (Atteste	nder Cumulative Investmen	t Diam (CID) in line of Co				
Documents (Atteste		B. Purchase of Units under Cumulative Investment Plan (CIP) in lieu of Cash dividend ( $$ )				
	d) enclosed			L		
<ul> <li>Documents (Attested) enclosed</li> <li>a. Trust deed</li> <li>b. Society Registration certificate</li> <li>c. Memorandum and Articles of Association</li> <li>d. NID No./ PP No./Birth Certificate [Applicant/Nominee (s)]</li> </ul>			e. e-TIN Certificate f. Extract of the Board Resolution g. Blank cheque leaf photocopy h. Others			
Specin	nen Signature of Principa	I Holder	Specime	n Signature of Joint Ho	older (if any)	
	Photo of Principal Holder  (Passport Size)			Photo of Joint Holder (Passport Size)		
	(, dosport 0.20)			(. doopon oizo)		
		Specimen Signature of Principa  Photo of Principal	Specimen Signature of Principal Holder  Photo of Principal Holder	Specimen Signature of Principal Holder Specimen  Photo of Principal Holder  Holder	Specimen Signature of Principal Holder  Specimen Signature of Joint Holder  Photo of Principal Holder  Photo of Joint Holder	Specimen Signature of Principal Holder  Specimen Signature of Joint Holder (if any)  Photo of Principal Holder  Photo of Joint Holder

Received Certificates for...... Units

as mentioned overleaf