

ICB AMCL Second NRB Unit Fund

INRB2-GA

Asset Manager: ICB Asset Management Company Limited

(A Subsidiary of ICB)

SURRENDER FORM

(Delete words not applicable. Please write clearly)

(To be filled in by Issuing Office)

To (Issuing Office Stamp)	Repurchase No.:
	Repurchase Date:
	Registration No.:
	B.O. No.:
	Signature(s) Verified:

To be filled in by the Applicant(s)

Date

I/We.....

Address.....

.....Telephone/Cell.....

being the Registered Holder(s) of.....Units at the rate of BDT.Per Unit of
ICB AMCL Second NRB Unit Fund by Certificate(s) Number(s)/CDBL Transfer Sequence No.....

.....

.....

.....

Registration/BO.No.....

Sale No.....Tr No.....

hereby declare that I/We am/are no longer interested in the Units and surrender the related Certificate(s) for repurchase on the price ruling on the repurchase date for this surrender.

I/We desire payment in the form of.....Payable to A/C No.

at BankBranch

Routing No..... and such Payment shall be accepted by me/us as full discharge in respect of the said Units.

Witnesses:

1. Signature :.....

Name :.....

Father's/ Spouse's Name :.....

Mother's Name :.....

Occupation :.....

Address :.....

1. _____
Signature of Principal Holder/
Authorized Representative (In the case of Institution)

2. Signature :.....

Name :.....

Father's/ Spouse's Name :.....

Mother's Name :.....

Occupation :.....

Address :.....

2. _____
Signature of Joint Holder/
Authorized Representative (In the case of Institution)

READ NOTES ON REVERSE

NOTES:

1. The Repurchase Date in respect of any Surrender shall be all working days except **Thursday** and book closure period on which it is accepted and found to be in order by the Issuing Office, or if accepted on any other day the last working day of the week next following, if last working day of the week happens to be a holiday the repurchase will be done on the next working day.
2. Other Office will receive Surrender Forms for sending to the appropriate Issuing Office. Holders are advised that such repurchases may be delayed and they may be charged for any postage and other costs involved.
3. Payment will normally be made to the first named unit holder by **“A/C Payee only”** cheque/BEFTN/RTGS. Payment required in any other form may involve the holder in further costs.
4. Application by Institution, Charitable Organization/Provident Fund/Trust Fund must be accompanied by the relevant document authorizing surrender in units such as Extract of Board Resolution, Letter of Authority issued in favour of Authorized person/signatory, A Power of Attorney in favour of the person signing the Surrender Form, relevant document if Board Resolution is not required in favour of such surrender in units etc.
5. MAKE SURE ALL CERTIFICATES/TRANSFER OF SECURITIES REPORT TO BE ATTACHED TO THIS FORM.

Received Cheque/Pay Order for BDT..... Cheque
/Pay Order no.....Date.....Bank.....
..... Branch on account of repurchase value of
..... Units as on overleaf.

Signature of Unit Holder(s)/
Authorized Representative (Institution)