

Systematic Investment Plan (SIP)

Asset Manager: Impress Capital Limited (ICL)

APPLICATION FORM TO PURCHASE UNITS-INDIVIDUAL

(Please read the "Terms and Conditions" carefully)

(Please fill up the form in block letters)

Managing Director
Impress Capital Limited
Evergreen Plaza (1st Floor)
260/B, Tejgaon I/A
Dhaka -1208, Bangladesh

For Office Use Only

Registration No.: Sale No.:

Selling Agent's Name:

Selling Agent's Signature & ID:

Authorized Person's Signature:

I/We would like to avail Systematic Investment Plan of ICL Balanced Fund BCB ICL Growth Fund Esquire ICL Apparel Fund ICL INCTL Shariah Fund

SIP Installment Frequency: Monthly Quaterly Half-yearly Yearly Payment Option: Cheque Auto-Debit Tenure: years

SIP Installment Amount in BDT..... (in words) 2nd Installment Date: DD/MM/YYYY

I/We enclose post-dated cheque(s)/cheque for 1st/other installment(s) bearing No. for SIP investment amount of BDT (in words) with this application.

Principal Applicant

Mr. ☐

Mrs. ☐

Ms. ☐

Name:

Father: Mother:

Spouse: Date of Birth: dd mm yyyy

Occupation: Name of Employer:

Present Address:

Permanent Address:

Nationality: National ID/Passport No.:

*Phone No.: *Email: Mode of Communication: Mobile Phone Email

Bank: Branch:

Account No.: *BO A/C No.:

ETIN: Dividend Option: Cash CIP

Joint Applicant (If Any)

Mr. ☐

Mrs. ☐

Ms. ☐

Name:

Father: Mother:

Spouse: Date of Birth: dd mm yyyy

Occupation: Name of Employer:

Present Address:

Permanent Address:

Nationality: National ID/Passport No.:

Contact No.: Email: Mode of Communication: Mobile Phone Email

Nominee 1

Mr. ☐

Mrs. ☐

Ms. ☐

Name:

Address:

Contact No.: National ID / Passport No. /Birth Certificate No.:

Email: Relationship with A/C Holder: Percentage of Holding Unit:

*Star marked fields are mandatory to be filled up

**Acknowledgement Copy will be provided seperately

Nominee 2 (if any) **Mr.** ☐ **Mrs.** ☐ **Ms.** ☐

Name:

Address:

Contact No.: National ID / Passport No.:

Email: Relationship with A/C Holder: Percentage of Holding Unit:

Guardian (if Nominee is minor) **Mr.** ☐ **Mrs.** ☐ **Ms.** ☐

Name:

Address:

Contact No.: National ID / Passport No. :

Email: Relationship with the Nominee:

Documents Enclosed (All documents must be duly signed by the Applicant)

- | | |
|--|---|
| <input type="checkbox"/> 1 Copy of NID/Passport/Birth Certificate of Applicant | <input type="checkbox"/> 1 Copy Passport Sized Photo of Applicant |
| <input type="checkbox"/> 1 Copy of NID/Passport/Birth Certificate of Nominee | <input type="checkbox"/> 1 Copy Passport Sized Photo of Nominee |
| <input type="checkbox"/> 1 Copy of E-TIN Certificate of Applicant | <input type="checkbox"/> Cheque for 1st/other SIP installment(s) |

Photographs

Principal Applicant	Joint Applicant	1st Nominee (Attested By Principal Applicant)	2nd Nominee (Attested By Principal Applicant)	Guardian (Attested By Principal Applicant)
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Terms and Conditions

I/we confirm that on receiving the Acknowledgement Slip against my/our investment in Mutual Funds managed by ICL, I/ We will abide by the "Terms and Conditions", which may be altered, replaced and modified from time to time by Impress Capital Limited as per regulatory requirements.

N.B:

1. During Surrender, the investor must transfer the units from his/her BO account to complete the payment process.

Signature

Principal Applicant	Joint Applicant (if any)	1st Nominee	2nd Nominee	Guardian
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I have explained the "Terms and Conditions of investment" and "Fundamentals of Mutual Fund" to this investor.

Date: