AKD Investment Management Ltd. (AKDIML) (AKDIML-01)

AKD Investment Management Ltd.

INVESTOR ACCOUNT OPENING FORM- CORPORATE

For Office Use Only

Portfolio No.	

GENERAL INSTRUCTIONS – PLEASE WRITE IN BLOCK LETTERS

1)This form is a one-time requirement and is required from investors only at the time of opening of an account with AKDIML 2) Fill the form in **BLOCK LETTERS** and in legible handwriting to avoid errors in application processing. 3) Fill the form by yourself or get it filled in your presence at your risk. 4) Do not sign and/or submit blank form. If any alteration is made, a countersign is mandatory. 5) Payment can be made in the form of a cheque, pay order or online account transfer. 6) The maximum number of Joint Holders shall be four (04) in number. 7) The maximum number of Nominee(s) can be two (02) in number with their respective share mentioned in percentage against their respective names. 8) It is the responsibility of the applicant to pay all charges and taxes in relation to the units purchased by him/her. 9) Investors can redeem their investments or convert from one fund to another at any given point in time. 10) Please tick in the appropriate box wherever applicable, in case any field is not relevant, please mark 'N/A' (Not Applicable). 11) Application will be processed as per cut off timings as announced by AKDIML from time to time.

CUSTOMER TYPE

Sector: O Public Ltd. O Private Ltd. O Insurance O Bank O DFI O Modarabas
O Retirement Funds O NGO O Partnership O Sole proprietor O Others O Mutual Funds

ACCOUNT DETAILS

Company / Business Name:

NTN Number (If exempted, please provide exemption letter):

Incorporation / Registration No. | Date of Incorporation/Registration of Legal Person/ Arrangements:

Business Address: | City: | Country:

Registered Address: | City: | Country:

Contact person name: | Email:

Landline No: | Fax:

Office Contact No: | Mobile Number:

BANK ACCOUNT DETAIL FOR REDEMPTION PURPOSE

Bank Account No. (IBAN preferred):

Bank Name: | Branch: | City:

DIVIDEND MANDATE

Cash Dividend: O Re-invest OR O Do not reinvest | Stock Dividend: O Issue Bonus Units OR O Encash Bonus Units

NATURE OF BUSINESS:

Geographies Involved: Domestic O Sindh O Punjab O KPK O Balochistan O Others: ____________ | International O FATF Compliant O FATF Non-Compliant

Type of Counter parties: Domestic O Sindh O Punjab O KPK O Balochistan O Others: ___________ | International O FATF Compliant O FATF Non-Compliant

Possible modes of Transaction O Online O Physical O Both | Expected No. of Transactions (Monthly): __________________________

Expected Turnover in Account: O Monthly Rs. ________________________ or O Annually Rs. ____________________________

Expected Amount of Investment: O upto Rs. 2.5Mn O Rs. 2.5Mn – Rs. 5Mn O Rs. 5Mn to Rs. 10 Mn O Rs. 10Mn to Rs. 100Mn O Above Rs. 100Mn.

SERVICES OFFERED

O SMS Alerts O E-Mail Fund Price Service

O E-Statement O Physical Statement

Account Statement Correspondence Frequency (please choose **one** of the options)
O Monthly O Quartetly O Semi Annually O Annually

Note: Physical statement of account will be dispatched in case email address is not provided, if email address is available E-Statement will be sent by default and no physical account statement shall be dispatched.

ACCEPTANCE BY AUTHORISED SIGNATORIES/ JOINT HOLDER(S) (IF ANY)

Authorised Signatories/Joint holder(s) Names	CNIC/Passport #	Signature
1) Mr./Ms./Mrs. (Principal Account Holder)		
2) Mr./Ms./Mrs.		
3) Mr./Ms./Mrs.		
4) Mr./Ms./Mrs.		

Category of CIS/Plans based on Investment policy	Risk Profile	Risk of Principal Erosion
Money Market Funds with no exposure in corporate commercial papers	Very Low	Principal at very low risk
Money Market Funds with investment in corporate commercial papers, Capital Protected Funds (non-equity), Income Funds with deposits/placement in A or above rated banks/DFIs and investment in Government Securities or Government backed Sukuks. Weighted average duration of portfolio of securities shall not exceed six (6) months.	Low	Principal at low risk
Income Funds with investment in AA rated corporate debt instruments, MTS and spread transactions. Weighted average duration of portfolio of securities shall not exceed two (2) years.	Moderate	Principal at moderate risk
CPPI Strategy Based Funds, Income Funds (where investment is made in fixed rate instruments or below A rated banks or corporate sukuks or bonds, spread transactions, Asset Allocation and Balanced Funds (with equity exposure up to 50% mandate).	Medium	Principal at medium risk
Equity Funds, Asset Allocation (with 0-100% Equity Exposure mandate) and Balanced Funds (with 30-70% Equity Exposure mandate), Commodity Funds, Index Tracker Funds and Sector Specific Equity related Funds.	High	Principal at High Risk

Note: The above Risk Profile table is in accordance with the SECP circular 06 of 2022, dated June 9, 2022.

I/We acknowledge of having read and understood the risks involved with investment in different categories of the CIS/Plan.

Signature

DOCUMENTS TO BE SUBMITTED

Club Societies and Associations	Joint Stock Companies / Trusts
1. Copy of Certificate of Registrations 2. By Laws /Rules and Regulations (Certified copy) 3. Board / Governing body Resolution 4. Copy of latest financials 5. List of Authorized signatories (Certified copy)	1. Copy of CNIC of all Directors/ Trustees 2. Audited / Latest Financials of the company 3. Memorandum and Articles of Associations / Trust Deed 4. Board/ Trustee / Governing body Resolution 5. Copied of Form A & Form 29 Duly Certified by SECP (for limited companies) 6. List of authorised Signatories (Certified Copy)
Partnership Account	**Executors and Administrators**
1. Details of Partners (Name, Address, Phone numbers) 2. Copy of CNIC of all Partners 3. Copy of latest Financials 4. List of Authorized signatories (Certified copy) 5. Resolution/ Authority Letter 6. Partnership deed (if any certified copy	1. Copy of CNIC of all Executor / Administrators 2. Letter of Administration / Resolution / Authority Letter (certified copy) 3. List of Authorised Signatories (certified copy)

Note: AKDIML holds the right to ask for any documents at any time.

APPLICATION CHECK LIST (to be filled by Sales Officer)

O Memorandum and Articles of Association / Bye Laws / Trust Deed
O Name and CNIC copies of Authorised Signatories
O Name and CNIC copies of Directors/ Trustees
O Certificate of Incorporation / Registration
O Board Resolution (authorizing investments)
O Company's Audited Accounts

DECLARATION

I/ We have carefully read and understood and agree to abide by all rules, regulations, terms and conditions, relevant Trust Deeds, Offering Documents and relevant Supplementary Documents, along with details of sales load to be deducted (if any) including taxes. In addition, I/we further authorize AKDIML to conduct its due diligence procedures as deemed necessary for opening my/our account. I have completely read, understood and duly filled all applicable sections of this Application Form prior to submission, to the best of my/our knowledge and belief. I/We ratify that the information in this form is correct. I/We acknowledge that if application is incomplete in any respect and /or not accompanied by required documents, AKDIML is liable to hold until complete requirements are fulfilled or reject thereof.

I / We hereby agree and give consent to AKDIML for performing Know-Your-Customer related verification, including but not limited to Identity Verification (NADRA Verisys), Bank Account Number / IBAN and Mobile Number verification and other external verification as and when required.

I hereby give consent to receive all correspondence related to transaction and activity through following:

O E-Statement
O Physical Statement

Date

Signature of Authorised Signatories

<table>
<tr><th colspan="3">OTHER INFORMATION (to be filled by Sales officer)</th></tr>
<tr><td colspan="3">Date:</td></tr>
<tr><td colspan="2">Target (Risk Profile)   O Low Risk   O Medium Risk   O High Risk</td><td rowspan="2">Signature and Stamp of Distributor</td></tr>
<tr><td>Sales Person’s Name</td><td>Sales Person’s Signature</td></tr>
<tr><td></td><td></td><td></td></tr>
<tr><td>Reporting Date</td><td>Signatures of Reporting Person</td><td>Signature & Stamp of Transfer Agent</td></tr>
<tr><td></td><td></td><td rowspan="3"></td></tr>
<tr><td colspan="2">Signature of Person Authorising Transaction at Transfer Agent</td></tr>
<tr><td colspan="2"></td></tr>
<tr><td colspan="3">REMARKS:</td></tr>
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