Initial Investment Form for Al-Ameen Islamic Retirement Savings Fund (AIRSF)

Customer ID [ ][ ][ ][ ][ ][ ][ ][ ][ ] – [ ]
In case of existing unit holder

al-ameen funds
Managed by UBL Fund Managers Limited

For assistance in filling out this form, Please call at 0800-26336 or sms HELP to 8258.

1 Principal Unit Holder Details (Mandatory)

Name (Mr/Ms/Mrs) ____________________
(Please write in block letters)

CNIC Number _____-_______-_ NTN ____________________

Occupation ☐ Service ☐ Self-employed Other ____________________
(please specify)

Employer / Business Name ____________________

Employer / Business Address ____________________

Correspondence to be sent to ☐ Residential Address ☐ Employer / Business Address ☐ Hold Mail

2 Nominee Details

1. Name (Mr/Ms/Mrs.) ____________________ CNIC/NICOP No. _____-_______-_

   Residential Address & Phone ____________________ Relation __________ % Allocation __________

2. Name (Mr/Ms/Mrs.) ____________________ CNIC/NICOP No. _____-_______-_

   Residential Address & Phone ____________________ Relation __________ % Allocation __________

Note: In case of more than two nominees, please attach a separate sheet with details mentioned above.
* Please provide the nomination deed along with nominee details.

3 Retirement Age

Please specify expected retirement age ____________________ or expected date of retirement __-__-____
(dd - mm - yyyy)

Note:
1. Retirement age can be 25 years from the date of first investment or any age between 60 to 70 years whichever is earlier.
2 If retirement age/date is not specified, by default the age/date 25 years from the first investment or 60 years whichever is earlier will be selected as the expected retirement age.
3. Expected retirement age can be changed at a later date (subject to terms and conditions specified in the Offering Document of the Fund)
4. If you would like to change your expected date of retirement you may do so by filling Section 6)of VPS Account Update Form. In case no written intimation is received till the date of your retirement, your VPS allocation will automatically be changed to 'Lower Volatility' at the date of retirement in accordance with the VPS Rules, 2005.

4 Bank Account Details of Principal Unit Holder (Mandatory)

Bank Account Details (atleast one) of Principal Unit Holder (Mandatory)

Bank Account Number ____________________ Bank Account Title ____________________

Bank Name ____________________ Branch Code ____________________ Bank Address ____________________

Note: Please provide bank account details for Additional account if applicable otherwise previously provided bank account details as per account opening forms will be updated

5 Initial Contribution Details

Account Type[4] ☐ PF ☐ Normal

Mode of contribution (tick one) ☐ Self ☐ Employer/Third Party

Investment details for 'Self' contribution

Initial Contribution Amount (Rs.) ____________________ In words ____________________

	Mode of Payment	Instrument No.	(Drawn on) Bank Name	Branch Name & Code
1	☐ Cheque ☐ Pay Order ☐ Online Transfer			
2	☐ Cheque ☐ Pay Order ☐ Online Transfer			

Note:
1. In case of Employer/Third Party initial contribution, 'Employer & Third Party Contributor Form' should be attached with details
2. Online account transfer facility is available with selected banks
3. Payment can be made in the form of a cheque, Cashier Cheque, pay order or online account transfer. Payment can be made in favor of "CDC Trustee Al-Ameen Islamic Retirement Savings Fund (AIRSF) or CDC Trustee Al-Ameen Funds"
4. Applicability of tax deduction at the time of withdrawal would be as per the prevailing Income Tax Laws

نوٹ: نقد رقم قابلِ قبول نہیں۔ ادائیگی صرف کراس چیک یا پے آرڈر یا آن لائن ٹرانسفر کے ذریعے کریں۔

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Principal Unit Holder's Signature

6 Allocation Scheme Details

Please select (any one) of the Allocation Schemes given below. In case of customized allocation, please specify the percentage (%) in the respective sub-funds.

HIGH ☐	MEDIUM ☐	LOW ☐	LOWER ☐	CUSTOMIZED ☐
Equity Sub-Fund 75% Debt Sub-Fund 25% MM Sub-Fund 0%	Equity Sub-Fund 40% Debt Sub-Fund 45% MM Sub-Fund 15%	Equity Sub-Fund 15% Debt Sub-Fund 65% MM Sub-Fund 20%	Equity Sub-Fund 0% Debt Sub-Fund 50% MM Sub-Fund 50%	Equity Sub-Fund _______% Debt Sub-Fund _______% MM Sub-Fund _______%
LIFE CYCLE ☐				
Age: 18-30 Equity Sub-Fund 75% Debt Sub-Fund 20% MM Sub-Fund 5%	Age: 31-40 Equity Sub-Fund 70% Debt Sub-Fund 25% MM Sub-Fund 5%	Age: 41-50 Equity Sub-Fund 60% Debt Sub-Fund 30% MM Sub-Fund 10%	Age: 51-60 Equity Sub-Fund 50% Debt Sub-Fund 30% MM Sub-Fund 20%	Age: 60 and above Equity Sub-Fund 0% Debt Sub-Fund 50% MM Sub-Fund 50%

Note:
1. Allocation scheme can be changed twice in a financial year subject to the terms and conditions specified in the offering document of the fund.

2. If an allocation scheme is not selected, the participant's contribution would be allocated in the default allocation scheme, i.e. lifecycle allocation scheme, untill such time the participant selects an allocation scheme.

3. Customized allocation scheme subject to the condition that 5 year remaining from the participant's chosen retirement age, the participants chosen retirement age, the participant shall aim to reduce allocation in equity sub-fund to a maximum of 25%, and a maximum of 25% in debit-sub fund, respectively.

7 Transfer from another Pension Fund Manager (If applicable)

Name of Pension Fund ______________________ Name of Pension Fund Manager ______________________

Date of Joining |_|_|-|_|_|-|_|_|_|_| (dd - mm - yyyy) Amount being transferred (Rs.) ______________________

Previous Pension Fund Manager's Address ______________________

8 Tax Applicability on Withdrawal (Mandatory Section)

Tax Status Please tick the appropriate option

☐ I file the income tax returns ☐ I do not file the income tax returns

Please note that at the time of early or excess withdrawal (as defined in VPS Rules), you would be required to submit preceding three years' filed income tax return. In absence of the required documents Al-Ameen Funds reserves the right to deduct tax including imposition of maximum tax rate prevailing at the time to comply with the income tax laws.

9 Declaration for Free Takaful Coverage (where applicable)

I declare for:

- not having had any illness requiring a hospital stay, medical treatment or medical follow-up for more than 30 days during the last 2 years Yes ☐ No ☐
- not having been off work for sickness for more than 14 consecutive days during the last 2 years Yes ☐ No ☐
- not having any surgical procedure or medical investigations planned for the next 6 months Yes ☐ No ☐

I confirm my understanding that failure to disclose a material fact may lead to the rejection of any claim relating to this Takaful Scheme.

Note: All above declarations are mandatory to tick. HQF will be required if 'Yes' is tick to any of the above.

نوٹ: نقد رقم قابلِ قبول نہیں۔ ادائیگی صرف کراس چیک یا پے آرڈر یا آن لائن ٹرانسفر کے ذریعے کریں۔

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Principal Unit Holder's Signature

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Declaration & Signature(s) تصدیق نامہ اور دستخط

I certify that I have the power and authority to establish this account and the features and services requested and that the authorizations hereon shall continue until any written notice of a modification or a termination signed by all appropriate parties. I hereby accept that the company may, at any time in the future require any verification before processing any requested transaction in this account. I acknowledge and accept that UBL Fund Managers Limited reserves the right to close or suspend, without prior notice, my account if required document/information is not submitted within a stipulated time.

I have carefully read, understood and accepted the terms and conditions given in the relevant Trust Deed (TD) and Offering Document (OD) of Al-Ameen Islamic Retirement Savings Fund. I understand that the company may amend or alter the terms and conditions referred herein and hereafter, from time to time. I understand to access the company website to keep myself updated before every operation of this account. I understand that investments in pension funds are subject to market risks and fund prices may go up or down based market conditions. I understand that past performance is not necessarily an indicator of future results and there is no fixed or guaranteed return. I declare that the amount so invested is legitimate and not generated from money laundering activities. I understand that my withdrawals made from the Al-Ameen Islamic Retirement Savings Fund, prior to retirement will result in a tax penalty/withholding tax. I have no objection to the Prescribed Investment Policy and Prescribed Application Policy determined by the Commission and the Pension Fund Manager and I am fully aware of the risks associated with the prescribed Allocation Scheme. I also hereby authorize the Pension Fund Manager to deduct applicable premium charges.

I confirm that I have understood the details of Sales Load to be deducted including taxes thereon.

میں اقرار کرتا ہوں کہ مجھے اس اکاؤنٹ کو قائم کرنے اور درخواست کردہ خصوصیات اور خدمات سے استفادہ کرنے کی قدرت اور اختیار حاصل ہے اور یہ کہ اس حوالے سے حاصل اختیارات اس وقت تک جاری رہیں گے تاوقتیکہ تمام متعلقہ پارٹیوں (فریقوں) کے دستخطوں سے ترمیم یا اختتام کا تحریری نوٹس موصول نہیں ہوجاتا۔ مجھے یہ بات قبول ہے کہ کمپنی ضروری سمجھے تو مستقبل میں کسی بھی وقت اس اکاؤنٹ میں درخواست کردہ کسی بھی ٹرانزیکشن (لین دین) پر عملدرآمد سے قبل تصدیق (جانچ پڑتال) کرسکتی ہے۔ مجھے یہ بات منظور ہے کہ میری جانب سے مقررہ میعاد کے اندر مطلوبہ دستاویزات/معلومات جمع نہ کرانے کی صورت میں یو بی ایل فنڈ منیجرز لمیٹڈ کو بغیر کسی پیشگی نوٹس میرا اکاؤنٹ بند کرنے یا معطل کرنے کا حق حاصل ہے۔

میں نے الامین اسلامک ریٹائرمنٹ سیونگز فنڈ کی متعلقہ ٹرسٹ ڈیڈ (TD) اور آفرنگ دستاویزات میں درج شرائط وضوابط کو غور سے پڑھا اور سمجھ لیا ہے اور مجھے یہ قبول ہیں۔ میں نے اس بات کو سمجھ لیا ہے کہ کمپنی وقتاً فوقتاً موجودہ یا بعد میں لاگو ہونے والی شرائط وضوابط میں ترمیم یا تبدیلی کرسکتی ہے۔ میں سمجھتا ہوں کہ باخبر رہنے کے لئے اس اکاؤنٹ کے ہر آپریشن (تعمیل) سے قبل کمپنی کی ویب سائٹ تک رسائی کروں گا۔ میں یہ سمجھتا ہوں کہ پنشن فنڈز میں سرمایہ کاری مارکیٹ خطرات سے مشروط ہے اور مارکیٹ کی صورتحال کے مطابق فنڈ کی قیمتوں میں اتار چڑھاؤ ہوسکتا ہے۔ میں یہ سمجھتا ہوں کہ ماضی کی کارکردگی مستقبل کے نتائج کی لازمی عکاس نہیں اور کوئی متعین یا ضمانت شدہ منافع نہیں۔ میں اقرار کرتا ہوں کہ سرمایہ کاری میں لگائی جانے والی رقم جائز ہے اور منی لانڈرنگ کی سرگرمیوں سے حاصل نہیں کی گئی۔ میں سمجھتا ہوں کہ ریٹائرمنٹ سے قبل الامین اسلامک ریٹائرمنٹ سیونگز فنڈ سے رقوم نکلوانے کے نتیجے میں ٹیکس پینالٹی (جرمانہ)/ ود ہولڈنگ ٹیکس عائد ہوگا۔ مجھے کمیشن اور پنشن فنڈ منیجر کی جانب سے عائد کردہ/مقرر کردہ مشروع/ مجوزہ انویسٹمنٹ/ سرمایہ کاری پالیسی پر کوئی اعتراض نہیں ہے اور میں مشروع/ مجوزہ ایلوکیشن اسکیم سے وابستہ خطرات سے پوری طرح واقف ہوں۔ میں پنشن فنڈ منیجر کو قابل اطلاق پریمیم چارجز منہا کرنے کی بھی اجازت دیتا ہوں۔

میں/ ہم تصدیق/تسلیم کرتے ہیں کہ میں/ ہم نے بشمول ٹیکسز منہا کئے جانے والے سیلز لوڈ کی تفصیلات کو سمجھ لیا ہے۔

Date | | - | | - | | | | |
(dd - mm - yy)

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Principal Unit Holder's Signature

نوٹ: نقد رقم قابل قبول نہیں۔ ادائیگی صرف کراس چیک یا پے آرڈر یا آن لائن ٹرانسفر کے ذریعے کریں۔

نوٹ: نقد رقم قابل قبول نہیں۔ ادائیگی صرف کراس چیک یا پے آرڈر یا آن لائن ٹرانسفر کے ذریعے کریں۔

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Instructions & Guidelines

1. Cash will not be accepted
2. Payment can be made in the form of a cheque, pay order or online account transfer
3. Payment shall be made in favor of 'CDC Trustee Al-Ameen Islamic Retirement Savings Fund'. In strument should be crossed 'Account Payee Only'
4. It should be the responsibility of the applicant to pay all charges and taxes in relation to the units purchased by him/her
5. Applications by foreign nationals and nonresident individuals shall be accepted subject to existing laws provided the subscription amount is paid by means of a remittance through banking channels or through means permitted by the State Bank of Pakistan (SBP)
6. Front-end load (charges) will be applicable on investment as per the constitutive documents of the Fund
7. Application will be processed as per cut-off timings for the Fund

Document Checklist

Before submitting this form, make sure the following documents are attached. If one or more of the documents are missing, your application may be declined or processed with a delay.

In case of Zakat Exemption, Zakat Affidavit shall be provided for the participant. If not submitted, Zakat will be deducted at the time of withdrawal.

☐ Copy of Pension Fund's Account Statement
(In case of transfer from another Pension Fund Manager)

☐ Employer & Third Party Contributor Form
(In case of contribution by Employer/Third Party)

☐ Nomination Deed
(In case nomination is filled up)

For Office Use Only

Distributor ______________________ Name of Agent ______________________ Sub-Agent ______________________

Reference/Agent Code ______________________ IC/Location ______________________ Remarks ______________________

CRM Lead | | | | | | | | |

General Instructions & Guidelines

1) This form is for use by individual applicants who want to open a Retirement Savings account with UBL Fund Managers. **2)** Fill the form in block letters and in legible handwriting to avoid errors in application processing. If any alteration is made, a countersign is mandatory. **3)** Fill the form yourself or get it filled in your presence. Do not sign and/or submit blank forms. **4)** Please tick in the appropriate box wherever applicable, in case any field is not relevant, please mark 'N/A' (Not Applicable). **5)** It is the responsibility of the applicant to carefully read and understand the guidelines and instructions provided in this form and the terms and conditions, especially risk disclosure, disclaimer, warning statement, investment objective in the Offering Document of Al-Ameen Islamic RetirementSavingsFund (AIRSF). **6)** Applications in complete in any respect and / or not accompanied by required documents are liable to be held or rejected until complete requirements are fulfilled. **7)** Applications complete in all respects and carrying necessary documentary attachments should be submitted at UBL Fund Managers' Investment Centers, designated UBL Branches, distributor outlets, or at UBL Fund Managers - Operations Office: 4th Floor, STSM Building, Beaumont Road, Civil Lines, Karachi, Pakistan. A complete list of Investment Centers, UBL Branches and distributor outlets is available on www.UBLFunds.com. To find an Investment Center near you SMS 'IC' to 8258. **8)** For assistance in filling this form or information about our products and services call our nationwide help line at 0800-26336