

**DAWOOD CAPITAL MANAGEMENT LIMITED**5B Lakson Square Building No. 1, Sarwar Shaheed Road, Karachi 74200, Pakistan UAN: 111-DAWOOD (111-329-663)
Tel: (92 21) 35621001-6 Fax: (92 21) 35621010 Email: dcm@fedawood.com URL: www.edawood.com**INVESTOR ACCOUNT OPENING FORM**

Date: _____ Please read the instructions carefully and write in BLOCK LETTERS

FOR OFFICE USE ONLY**1. INFORMATION ABOUT PRINCIPAL ACCOUNT HOLDER/INSTITUTION**

Registration # : _____

PRIMARY APPLICANT

Mr./Ms./Mrs./Messers. _____

Contact Name (In case of institution) _____

Mailing Address : _____

Permanent Address: _____

City: _____ Country: _____ Tel: _____

Mobile _____ Email: _____

Fax: _____ National Tax No: _____

Registration / Incorporation No: _____

TO BE FILLED BY INDIVIDUALS ONLY:

Name of Father/Husband _____

Date of Birth: _____

CNIC/Passport No: _____

Job Title/Nature of Business _____

Name & Address of Employer/Business: _____

Name of Guardian (in case of minor): Mr./Mrs./Ms./Miss _____

Applicant Status:

-
- Individual
-
- Corporate
-
-
- Commercial Bank
-
- Insurance Company
-
-
- Modaraba
-
- NBFC
-
-
- Retirement Fund
-
- Welfare Organization/Trust
-
-
- Other (Specify) _____

Gender Male FemaleNationality Pakistani Non-Resident Pakistani Other (Specify) _____Marital Status Single MarriedZakat Deduction No Yes

If yes, please provide Affidavit

Income Tax Status Taxable Exempt

Attach Tax Exemption Certificate

2. FULL DETAILS OF BANK ACCOUNT OF PRINCIPAL ACCOUNT HOLDER:

Bank Account No: _____ Bank Name & Branch _____

Bank Address _____ Bank Tel No: _____

3. INFORMATION ABOUT JOINT ACCOUNT HOLDERS/PARTNERS (IF ANY) /AUTHORISED SIGNATORIES FOR INSTITUTION**First Joint Holder/Signatory**

Mr./Ms./Mrs. _____

Name of Father/Husband. _____

Address: _____

Occupation: _____ Designation: _____

Tel: _____ Fax: _____ Email: _____

CNIC/Passport No.: _____ Date of Birth: _____

Second Joint Holder/Signatory

Mr./Ms./Mrs. _____

Name of Father/Husband. _____

Address: _____

Occupation: _____ Designation: _____

Tel: _____ Fax: _____ Email: _____

CNIC/Passport No.: _____ Date of Birth: _____

In case of more than 2 Joint Holders/Partners, please attach a separate list with details.

4. INFORMATION ABOUT NOMINEE(S) (Applicable to singly held individual account only)

The undersigned are my nominees and legal heirs to my estate and receive the units held in my name according to their share in event of my death after fulfilling all legal processes. I further agree that the Trustee, the Distribution Company and/or the Management Company shall not be liable for any issues/disputes amongst my legal heirs and/or the nominee(s) arising out of this nomination. The entitlement to a fraction of a Unit may be consolidated and redeemed. The proceeds may be paid to the nominees.

Mr./Ms./Mrs. _____

Relation with holder: _____ Share % _____

Name of Father/Husband: _____

Address: _____

Tel: _____ Email: _____

CNIC/Passport No.: _____

Mr./Ms./Mrs. _____

Relation with holder: _____ Share % _____

Name of Father/Husband: _____

Address: _____

Tel: _____ Email: _____

CNIC/Passport No.: _____

In case of more than two nominees, please attach a separate list with details.

5. INSTRUCTIONS**1. Account Operating Instructions (In case of institution, signature should be accompanied by rubber stamp)**

-
- Principal A/C Holder Only
-
- Either or Survivor
-
- Jointly by any two
-
- Jointly by all
-
- Other

2. Instruction for delivery of Account Statements

-
- By E-Mail/Web
-
- By Post
-
- Hold Mail

Frequency: Monthly Quarterly Annually**3. Dividend Mandate**In case of Cash Dividend : Re-invest Or Provide Cash

(Please tick against relevant boxes)

In case of Stock Dividend : Issue Bonus Units Or En-cash Bonus Units **6. DECLARATION**

I/We declare that, I/we have read the instructions carefully and agree to abide by terms and conditions, rules and regulations of Dawood Capital Management Ltd. (DCM) and its Funds. All applicable sections of this application form have been completed prior to submission. I/We confirm to have understood the terms and conditions, investment objectives, strategy, fundamental objectives and risk factor involved.

Authorized Branch (Stamp): _____

Primary Applicant Signature _____

Signature _____

Signature _____

FOR OFFICE USE ONLY

Distributors/Facilator Name	Name of Authorized Person	Signature	Date of Receiving	Time of Receiving

FOR REGISTRAR USE ONLY

Form Received on	Registration # Issued by Client	Date input by	Data & Attachments verified by



Guidelines for completing the Investor Account Opening Form

This form is common for both individual and institutional customers, and should be used to make investments in Funds of Dawood Capital Management Limited.

Information about Principal Account Holder

1. Information about the Principal Account Holder is recorded under relevant section.
2. Please make ensure that information i.e. name, address, phone provided in this section is correct.
3. In case of Individual, if the client chooses "NO" for Zakat Deduction, the Zakat declaration would be required (in case of joint holder such declaration from all holders will be required).
4. In case of Institutional Client, ensure that type of institution and Registration/Incorporation number and the National Tax Number is filled in under the "For institution Client" section.
5. In case of Partnership Firm or Trust, application shall be made in the name of partner or trustees.

Details of Bank Account of Principal Holder

6. Please make sure to provide correct details of bank account of Principal Account Holder. Any error in filling this information may cause delay in transfer of funds to the account holder.

Details of Joint Holder(s) if any

7. If there are any Joint Holders, their name(s) need to be specified along-with their CNIC # and signature (Joint signatories for institution).
8. Please "Tick" how the account shall be operated.

Death of Unit Holder

9. In the case of Dawood Capital Management Limited (DCM) receiving notices of the demise of an investor, DCM shall not be obligated to allow the transfer of title, redemption or pay out of any dividends without the production of evidence of title or right to the units which DCM considers sufficient.

Other instructions

10. In case the Account Holder is illiterate and cannot sign, then he/she must be require to submit either a clear copy of CNIC with photo or one recent passport size photograph authenticated by his/her banker. His/her form would also need to be signed by two witnesses.
11. In case of an Application Form being filled in by the guardian on behalf of a minor(s), the name of the minor(s) as well as of the guardian should be written clearly on the Form and the guardian's signature should be recorded.
12. It shall be the reponsibility of the applicant to pay all stamp and other duties, taxes and processing charges in relation to the units acquired by him/her.
13. For change in the Unit Holder's Register, such as address, phone number, bank detail, dividend option or Zakat option, unit holders may please write to the Investor Services, Dawood Capital Management.

DOCUMENTS REQUIRED (Certified True Copies)

Documents to be submitted at the time of Investment: (Application will not be processed without receipt of all documents as applicable)

FOR INDIVIDUALS	FOR CORPORATES
<input type="checkbox"/> Copy of CNIC(s) of the principal and all the Joint Holder(s).	<input type="checkbox"/> List of Authorized Signatories with copy of their CNICs.
<input type="checkbox"/> Copy of CNIC(s) of Nominee(s).	<input type="checkbox"/> Board Resolution authorizing investment.
<input type="checkbox"/> Form-B (Registration Certificate) in case of minor(s).	<input type="checkbox"/> Memorandum & Articles of Association/Bye-Laws/Trust Deed
<input type="checkbox"/> Copy of Zakat Affidavit (Form CZ50)	<input type="checkbox"/> Power of Attorney or other documents authorizing the Officer(s) Other (Please specify)
<input type="checkbox"/> Copy of Passport Residence Permit (In case of overseas Pakistanis and Foreign Investors)	<input type="checkbox"/> Copy of latest Annual Accounts (In case of Unlisted Company, Partnership Firm, Trust)
<input type="checkbox"/> Business / Employment Proof	<input type="checkbox"/> Copy of CNICs of all Partners / Directors / Trustees

Please Note: *In order to take the financial market volatility into account, the prices of mutual funds investing in stocks and securities are determined after close of the market. Therefore, the NAV-based unit prices applicable for investment having any element of investment in financial market will be unknown at the time of investment.*