

Systematic Investment Plan (SIP)

Asset Manager: Impress Capital Limited (ICL)
APPLICATION FORM TO PURCHASE UNITS-INSTITUTION
(Please read the "Terms and Conditions" carefully)

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:

(Please fill up the form in block letters)

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:
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.

Name of the Institution:

Type of the Institution: Local Company Foreign Company Society Trust Others

Registration no.: ETIN no.:

Address:

Contact No.: FAX: Email:

Bank: Branch:

Account No.: BO A/C No.:

Name of CEO/MD:

Dividend Option: Cash CIP Units Held (If any):

Details of the person/s (if any)

Serial No	Name	Designation	Signature	Contact No
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Mode of Operation: Jointly by Singly by

Documents Enclosed

- | | |
|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Memorandum and Article of Association | <input type="checkbox"/> E-TIN Certificate (Applicant) |
| <input type="checkbox"/> Power of Attorney/ Extract of Minutes of Board Resolution in favor of Authorized Person(s) | <input type="checkbox"/> Copy of NID/Passport/Authorized Signature |
| <input type="checkbox"/> Trade License/Trust Deed/Certificate of Incorporation | <input type="checkbox"/> Cheque for 1st/other SIP installment(s) |
| <input type="checkbox"/> BO Account ID | <input type="checkbox"/> Photocopy of a Blank Undated Cheque leaf |

Photographs

CEO/MD

1st
Authorized
Person

2nd
Authorized
Person

Terms and Conditions

I/we confirm that on receiving the Acknowledgement Slip against my/our investment in Mutual Fund 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

Seal & Signature of the Authorized Person

...../...../.....
Date of Application