

BANGLADESH FUND

Asset Manager: ICB Asset Management Co. Ltd.  
(A Subsidiary of ICB)

APPLICATION FORM TO PURCHASE UNITS BY NRBs / NRs

To <b>Chief Executive Officer</b> ICB Asset Management Company Limited BDBL Avenue (Level-17) 8 RAJUK Avenue Dhaka-1000.	To be filled in by Issuing Office
	Sale Day
	Date of Issue
	Registration No. BDF/
	Sale Number :
Certificate Number(s) : <div>Signature of the Officer with date</div>	

To be filled in by the Applicant (s)

Date : .....

(Please write clearly and delete words not applicable)

I/We enclose \$/£/€ (in word )  
\* PO/FDD/TT No date: Bank Branch and  
request you to sell to me/us Units of **Bangladesh Fund** at the price of Tk. per unit (Prevailing on the Sale Date)  
for application including respective fees. I/We already hold /do not hold Units and my/our Registration No is BDF/

I/We am/are not minor(s). I/We have read and understood the terms and conditions of the Deed of Trust and Prospectus of the Fund and agreed to be bound and governed by the same on availing/using any facility. I/we further agree not to hold the Fund liable for any consequences in case of any of the below mentioned particulars being false, incorrect or incomplete. I/we hereby undertake inform the Asset Manager of any changes to the information provided herein below and agree and accept that the Fund and its Asset Manager is not liable or responsible for any loss.

All payments in connection with or arising out of the Units hereby applied for shall be payable in Bangladeshi Taka only including income distribution and/or repurchase price. I/We and my/our heirs may at any time or in any shape claim repatriation from Bangladesh of sale proceeds of these Units and income accrued thereon. I/We the undersigned do also hereby declare that the money which is being invested for the purchase of **Bangladesh Fund** is not earned /collected directly or indirectly in illegal way.

Principal Holder’s Signature: Joint Holder’s Signature (if any):

(BLOCK LETTERS PLEASE)

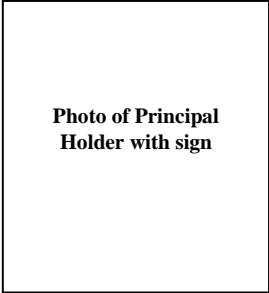
1. Principal Holder

Name (Individual/Institution):  
Father’s Name:  
Mother’s Name:  
Spouse’s Name:  
Date of Birth:   
Passport no. Valid up to   
Nationality Sex (M/F)   
National ID no.   
Present Address   
 Zip Code   
Permanent Address   
 Zip Code   
Telephone/Cell No:   
Email:

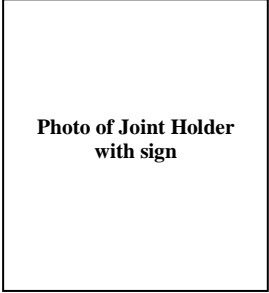
2. Joint Holder (if any)

Name (Individual/Institution):  
Father’s Name:  
Mother’s Name:  
Spouse’s Name:  
Date of Birth:   
Passport no. Valid up to   
Nationality Sex (M/F)   
National ID no.   
Present Address   
 Zip Code   
Permanent Address   
 Zip Code   
Telephone/Cell No:   
Email:

Specimen Signature of Principal Holder



Specimen Signature of Joint Holder (if any)



\* Purchasers may sending application by post/e-mail to the issuing Office on Sale Day subject to refund of unadjusted portion of the remittance.  
N.B. Please Read terms & conditions on reverse.

Purchase of Units under Cumulative Investment Plan (CIP) in lieu of Cash dividend (please √ )

Yes

No

Bank Details

Account No. Bank Branch

Address:

Occupation (please √)

a. Civilian	<input type="checkbox"/>	i. House- Wives	<input type="checkbox"/>
b. Govt. Salaried	<input type="checkbox"/>	j. Working Women	<input type="checkbox"/>
c. Non-Govt. Servants.	<input type="checkbox"/>	k. Workers	<input type="checkbox"/>
d. Defense Personnel	<input type="checkbox"/>	l. Student	<input type="checkbox"/>
e. Professions-Legal, Doctor, Engineer etc.	<input type="checkbox"/>	m. Bangladeshi Residing Abroad	<input type="checkbox"/>
f. Retired Personnel	<input type="checkbox"/>	n. Foreign National	<input type="checkbox"/>
g. Businessmen	<input type="checkbox"/>	o. Scientist	<input type="checkbox"/>
h. Agriculturists	<input type="checkbox"/>	p. Miscellaneous.	<input type="checkbox"/>

Type of Institution ☐ Local Company ☐ Foreign Company ☐ Trust ☐ Society ☐ Other ☐

Documents (Attested) enclosed (please √ )

a. Incorporation Certificate	<input type="checkbox"/>	f. TIN Certificate (Institution)	<input type="checkbox"/>
b. Trust deed	<input type="checkbox"/>	g. Extract of the Board Resolution	<input type="checkbox"/>
c. Society Registration certificate	<input type="checkbox"/>	h. Relevant Document if Board Resolution is not required	<input type="checkbox"/>
d. Memorandum and Articles of Association	<input type="checkbox"/>	i. Letter of Authority/POA issued in favour of authorized person/signatory	<input type="checkbox"/>
e. Copy of Passport & Visa	<input type="checkbox"/>	j. Bank Statement	<input type="checkbox"/>
f. National ID (If any)	<input type="checkbox"/>	k. Proof of Address	<input type="checkbox"/>

TERMS & CONDITIONS

1.

Units will be sold through ICB AMCL Head Office, Authorized Bank Branches including ICB Branches on all working days except Thursday and book closer period declare by office. The acceptance of any application shall be delayed until the realization of any payment instrument enclosed with it. As the clearance of instrument drawn on banks in towns other than that of the Issuing Office may take a long time, the applicants are advised to send a Bank Draft or a Pay Order. The value of units may be paid at the prevailing exchange rate published by the Asset Manager of the Fund.
2.

Remittance should be in form of pay order, foreign demand draft, TT or should be directly made payable to the “**ICB AMCL Bangladesh Fund**” NITA Account No. **01-1149151-01** with **Standard Chartered Bank, Dhaka, Bangladesh**.
3.

Registration Number is issued to the Unit Holders. The existing Unit Holder is required to mention the previous Registration Number on the specified column of the Application Form when he intends to buy more units. More than one Registration Number is not issued to the same Unit Holder. Upon Registration of a sale, Unit-Holders will be issued with Unit Certificates. The certificates are available in denomination(s) of 1, 5, 10, 20, 50, 100, 250, 500, 1000, 5000 and 10000 Units. The fewest possible number of certificates will be issued against each application.
4.

Units will be registered in the name(s) of the Applicant(s), Joint Holder’s, Institutions will be registered provided that Application Form is duly completed and signed by all Joint Holder’s or both Signatory (in case of Institution). Dividend and any other payment/benefits (if any) will be issued in favour of Principal Holder only. In case of the death of any of the Joint Holder’s, only the survivor shall be recognized as having any title to the Units. But absolutely on death of the Principal Holder as well as both the Joint Holder’s the units and entitlements will bestow upon the Nominee(s) if any mentioned in the Nominee Form [BDF Unit-KA(1)]. Principal Holder as well as Joint Holder’s can change the nominee through submitting application of Nominee Form to the authority where previously submitting Nominee Form will be automatically cancelled.
5.

Individual applicant has to submit photocopy of his/her valid passport and visa, bank statement, proof of address etc. Application(s) by Institution, Charitable Organization/Provident Fund/Trust Fund must be accompanied by the relevant documents authorizing investment in Units such as Incorporation Certificate, Extract of Board Resolution, Memorandum and Articles of the Company, Trust Deed, Society Registration Certificate, TIN Certificate, By-Laws of the Society, a Resolution by the Management Body and Power of Attorney (POA) in favour of the person(s) signing the Application(s). If investment is being made by a Constitutional Attorney, please submit notarized copy of POA.
6.

**Cumulative Investment Plan (CIP):** Under this scheme, Unit Holder might reinvest dividend income accrued thereon for purchasing unit at a concessional rate instead of receiving cash dividend. In this case new units would be issued at Tk.1.00 less than the opening price of the next financial year.
7.

**Transaction Fees:** Applicant has to bear the transaction fees as 0.10% of total transaction amount having minimum US\$ 5.00 and maximum US\$ 100.00. Fees should be transmitted along with the application money.
8.

Unit Holder’s must be provided the Bank Account No. and address of Bank Branch.
9.

Standard Chartered Bank, Bangladesh will act as a custodian of unit holders. The unit holder’s need not to pay any charges to avail this advantage.

Sign of Principal Holder with date

Sign of Joint Holder (if any) with date

**Mailing Address**  
**ICB Asset Management Company Limited**  
BDBL Bhaban (Level-17)  
8 RAJUK Avenue, Dhaka-1000, Bangladesh.  
Tel: +88-02-9573077, Fax: +88-02-9570176  
Email: info@icbamcl.com.bd  
Website: www.icbamcl.com.bd

Received Certificates for\_\_\_\_\_ Units as mentioned overleaf

(Sign of Applicant/Authorized Agent with date)

BANGLADESH FUND

Asset Manager: ICB Asset Management Co. Ltd.

(A Subsidiary of ICB)

APPLICATION FORM FOR NOMINEE(S)

To  
Chief Executive Officer  
ICB Asset Management Company Limited  
BDBL Avenue (Level-17)  
8 RAJUK Avenue  
Dhaka-1000, Bangladesh.

Nominee Control Number :  
(To be filled in by Issuing Office)

Date: .....

BLOCK LETTERS PLEASE

I/We already hold ..... Units and my/our Registration No is BDF/.....

I/We nominate the following person(s) who is/are entitled to receive unit certificate and all other entertainment outstanding in connection with my/our aforesaid Registration Number in the event of the death of the Principal Holder/Joint Holder.

Nominee- 1

Name in Full

Relation with A/C Holder ..... Percentage (%) .....

Address

City ..... Zip Code ..... State/Division ..... Country .....  
Telephone /Cell Phone ..... National ID No .....  
Email ..... Passport No ..... Issue Place ..... Issue Date .....  
Expiry Date .....

Residency: Resident ☐ Non-Resident ☐ Nationality ..... Date of Birth (DDMMYY) .....

Recent Passport size  
Photograph

Nominee-1

Guardian's Details (If Nominee- 1 is a Minor)

Name in Full

Relation with A/C Holder ..... Percentage (%) .....

Address

City ..... Zip Code ..... State/Division ..... Country .....  
Telephone /Cell Phone ..... National ID No .....  
Email ..... Passport No ..... Issue Place ..... Issue Date .....  
Expiry Date .....

Residency: Resident ☐ Non-Resident ☐ Nationality ..... Date of Birth (DDMMYY) .....

Recent Passport size  
Photograph

Guardian-1

Nominee- 2

Name in Full

Relation with A/C Holder ..... Percentage (%) .....

Address

City ..... Zip Code ..... State/Division ..... Country .....  
Telephone /Cell Phone ..... National ID No .....  
Email ..... Passport No ..... Issue Place ..... Issue Date .....  
Expiry Date .....

Residency: Resident ☐ Non-Resident ☐ Nationality ..... Date of Birth (DDMMYY) .....

Recent Passport size  
Photograph

Nominee-2

Guardian's Details (If Nominee- 2 is a Minor)

Name in Full

Relation with A/C Holder ..... Percentage (%) .....

Address

City ..... Zip Code ..... State/Division ..... Country .....  
Telephone /Cell Phone ..... National ID No .....  
Email ..... Passport No ..... Issue Place ..... Issue Date .....  
Expiry Date .....

Residency: Resident ☐ Non-Resident ☐ Nationality ..... Date of Birth (DDMMYY) .....

Recent Passport size  
Photograph

Guardian-2

	Name	Signature
Nominee- 1		
Guardian- 1		
Nominee- 2		
Guardian- 2		
Principal Account Holder		
Joint Account Holder		

Signature Verified by Officer with date

Signature of the Authorized Officer with date