

Registration / Account Update Form



For Official Use

Please complete this form in **BLOCK** Letters

Channel Partner / Company _____ Region _____ Branch Name _____
 Branch Code _____ City _____ Agent Name _____ Comments _____

Please Select Activity

Please Check 1 Registration Account Update, JSIL A/C No. _____ Date _____
 Client Type Individual (Sections 1,4,5,6,7,8) Joint Account (Sections 1,2,4,5,7,8) Institutional (Sections 3,4,5,7,8) SMA Account Yes No

Section 1: Personal Details (First Applicant)

Minor Yes No Marital Status Married Unmarried
 Occupation Business Employment Retired Other, Please specify _____
 Income From Business Employment Retirement Other Sources, Please specify _____
 Date of Birth(DD/MM/YYYY) _____ Religion _____
 Name (Mr / Mrs / Ms) _____
 Father's / Husband Name _____
 CNIC / Passport No. _____ Expiry Date _____
 Nationality _____ Resident Yes No
 Guardian's Name (In case of Minor) _____
 Guardian's CNIC / Passport No. _____
 Relation with Minor _____
 Address _____
 Mobile _____ Ph. Residence _____
 Ph. Office _____ Fax _____
 Email Address _____

Section 2: Personal Details (Additional Applicant for Joint Account)

In case of more than 2 Applicants please use additional forms

Applicant 2
 Minor Yes No Marital Status Married Unmarried
 Occupation Business Employment Retired Other, Please specify _____
 Income From Business Employment Retirement Other Sources, Please specify _____
 Date of Birth(DD/MM/YYYY) _____ Religion _____
 Name (Mr / Mrs / Ms) _____
 Father's / Husband Name _____
 CNIC / Passport No. _____ Expiry Date _____
 Nationality _____ Resident Yes No
 Guardian's Name (In case of Minor) _____
 Guardian's CNIC / Passport No. _____
 Relation with Minor _____
 Address _____
 Mobile _____ Ph. Residence _____

Applicant 3
 Minor Yes No Marital Status Married Unmarried
 Occupation Business Employment Retired Other, Please specify _____
 Income From Business Employment Retirement Other Sources, Please specify _____
 Date of Birth(DD/MM/YYYY) _____ Religion _____
 Name (Mr / Mrs / Ms) _____
 Father's / Husband Name _____
 CNIC / Passport No. _____ Expiry Date _____
 Nationality _____ Resident Yes No
 Guardian's Name (In case of Minor) _____
 Guardian's CNIC / Passport No. _____
 Relation with Minor _____
 Address _____
 Mobile _____ Ph. Residence _____

Section 3: Institutional (for Companies/Institutions/Trusts & Others)

Legal Status Company Partnership Gratuity Fund Provident Fund Pension Fund Commercial Bank
 Others, Please specify _____ NTN _____
 Institution Name _____
 Registered Address _____
 Correspondence Address _____
 Contact Name _____
 Designation _____
 Email Address _____
 Mobile _____ Ph. Office _____
 Fax _____

Note: Signature is compulsory for all client types

Signatures

 Applicant 1

 Applicant 2

 Applicant 3

 Applicant 4

Section 4: Bank Details

Please note that the bank account needs to be in the name of the applicant and marked online for available online facilities

Bank Account Title _____
 Bank Account No. _____ Branch Code _____
 Bank Name _____
 Branch Name _____
 Address _____

Section 5: Operating Instructions

(a) Web Access Yes No (b) Daily NAV Email SMS (c) Transaction Statement Email Post SMS
 (d) Statement Delivery Post Email (e) Zakat Deduction Yes No¹ (f) With holding Tax Exempt² Non-Exempt
 (g) Payout Instructions³
 I) In case of choice between Cash and Bonus, please select Payout Option: Cash Bonus
 II) In case of Bonus only, do you wish to Encash: Yes No
 III) In case of Dividend (Cash), do you wish to Re-invest*: Yes No
 IV) In case of more than one fund, please see Payout Instruction Form: Yes No
 (h) Signing Authority First Applicant Any Applicant Any Combination of Authorized Signatories⁴ All Jointly
 Others, Please specify _____

¹Kindly provide Zakat Exemption Affidavit (Certificate) ²Kindly provide Tax Exemption Affidavit (Certificate) ³By Default the above selected option will apply to all funds, in case of change please use the Payout instruction Form
⁴Incase of Institutions, need to submit board resolution *Taxes to be deducted as per applicable tax laws.

Section 6: Next of Kin (In case of Individuals)

Relative 1
 Name (Mr / Mrs / Ms) _____
 CNIC / Passport No. _____ Relationship _____
 Address _____
 Mobile _____ Phone _____

Relative 2
 Name (Mr / Mrs / Ms) _____
 CNIC / Passport No. _____ Relationship _____
 Address _____
 Mobile _____ Phone _____

Section 7: Checklist of documents submitted

Individual and Joint Account Applicants

Resident Non Resident

Passport / CNIC Copy Passport Copy / NICOP / POC Copy
 Zakat Exemption Certificate (if Applicable) Zakat Exemption Certificate (if Applicable)
 Copy of B-Form of minor (attested, if applicable) Copy of B-Form of minor (attested, if applicable)
 Guardian Certificate (if applicable) Guardian Certificate (if applicable)

Institutional Applicants

List of Authorized Signatories Memorandum and Articles of Association
 Board resolution authorizing investments and signatures CNIC / Passport copies of authorized signatories
 Trust deed in case of Provident / Employee contribution fund / Pension fund
 By laws in case of welfare / Non profit organization



Section 8: Declaration

I/We hereby acknowledge that I/We have fully understood all the reference notes; and the provisions of the Trust Deed and Offering Document including the risk disclosures, warnings. Further, I/We hereby ratify that the information provided on this form is correct and that no other person(s) has any financial interest in this account. I/We will not claim repatriation from Pakistan of dividend or sales proceed of unit(s) registered in my/our account except as permissible under the rules of State Bank of Pakistan or Ministry of Finance, Government of Pakistan.

I/We hereby acknowledge that I/We have been informed of the general risks of investment in mutual funds and also confirm that JS Investments Limited (JSIL), through its authorized representatives and distribution agents, has fully disclosed the specific risk factors associated with this investment to my/our complete satisfaction. I/We fully understand that past performance does not necessarily indicate future performance.

 Signature Applicant 1

 Signature Applicant 2

 Signature Applicant 3

 Signature Applicant 4

NOTE: IN CASE OF MINOR / GUARDIAN / SHAKY SIGNATURES / ILLITERATE APPLICANT / THUMB IMPRESSION then he / she is required to submit either a clear copy of CNIC / "B Form" (in case of Minor) authenticated by his / her banker. His / Her form would also need to be signed by two witnesses.

Witness Name (1)
 Name _____
 CNIC / Passport No. _____
 Signature _____

Witness Name (2)
 Name _____
 CNIC / Passport No. _____
 Signature _____

Please Check 1 Registration Account Update, JSIL A/C No. _____

Client Type Individual Joint Account Institutional, Name _____

SMA Account Type Yes No

Signature Specimen as per CNIC (for all Applicants)

In case of Signature change, please provide new specimen signatures in comparison to your old signature along with your CNIC and updated relevant forms

<p>Applicant 1</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>Name (Mr / Mrs / Ms) _____</p> <p>CNIC / Passport No. _____</p>	<p>Applicant 2</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>Name (Mr / Mrs / Ms) _____</p> <p>CNIC / Passport No. _____</p>
<p>Applicant 3</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>Name (Mr / Mrs / Ms) _____</p> <p>CNIC / Passport No. _____</p>	<p>Applicant 4</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>Name (Mr / Mrs / Ms) _____</p> <p>CNIC / Passport No. _____</p>
<p>Applicant 5</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>Name (Mr / Mrs / Ms) _____</p> <p>CNIC / Passport No. _____</p>	<p>Applicant 6</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>Name (Mr / Mrs / Ms) _____</p> <p>CNIC / Passport No. _____</p>
<p>Applicant 7</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>Name (Mr / Mrs / Ms) _____</p> <p>CNIC / Passport No. _____</p>	<p>Applicant 8</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>Name (Mr / Mrs / Ms) _____</p> <p>CNIC / Passport No. _____</p>

Proof of Application for Registration / Account Update (Investor Copy)

Date _____

Please Check 1 Registration Account Update, JSIL A/C No. _____

Client Type Individual Joint Account Institutional SMA

Investor Name _____

For Official Use

Channel Partner / Company _____ Agent Name _____

Receiving Stamp & Signature _____



Reference Notes:

1. If any field is not applicable kindly write N/A.
2. The form must be signed by the persons as per the list of authorized signatories (along with a company stamp in case of institutional customers).
3. In case the applicant is Minor; guardian's authenticated CNIC copy by his / her banker shall be provided. His / Her form will also need to be signed by the guardian as an authorized signatory.
4. In case of Minor / Guardian / Shaky Signatures / Illiterate Applicant / Thumb Impression then he / she is required to submit either a clear copy of CNIC / "B Form" (in case of Minor) authenticated by his / her banker. His / Her form would also need to be signed by two witnesses.
5. Management Company or Trustee has the right to reject application in accordance with the Trust Deed and/or Offering Document.
6. All transaction are subject to levies, duties, charges, taxes etc. as per the relevant statutes enforced for the time in Pakistan.
7. All correspondence will be made with First Applicant only.
8. User ID and Password for access to web reports and/or unit transactions (as requested) shall be sent via post or email as specified.
9. Zakat exemption shall only be applicable in case that all joint account holders submit their respective Zakat affidavit. In case of Non-Muslim, Zakat Deduction will not be applicable.
10. **In case of Signature change, please provide new specimen signatures in comparison to your old signature along with your CNIC and updated relevant forms.**
11. If the form is being utilized for Account Updation purposes, then please provide JSIL account number and fill in the relevant fields only and not the complete form.
12. **Documents Required:** (1) Copy of CNIC of all applicants or authorized signatories (2) In case of Zakat exemption provide Zakat affidavit (original or attested); (3) In case of minor provide B-Form of minor (attested - if applicable) (4) Guardian Certificate in case Guardian is different from parents (attested - if applicable) (5) Tax-exemption certificate (attested - if applicable) and;(6) Succession Certificate in case of death of applicant (applicable for Individual and Joint Account Holders).

Checklist of Documents (Official use only)

Individual and Joint Account Applicants

- | | |
|--|--|
| <input type="checkbox"/> Resident | <input type="checkbox"/> Non Resident |
| <input type="checkbox"/> Passport / CNIC Copy | <input type="checkbox"/> Passport Copy / NICOP / POC Copy |
| <input type="checkbox"/> Zakat Exemption Certificate (if Applicable) | <input type="checkbox"/> Zakat Exemption Certificate (if Applicable) |
| <input type="checkbox"/> Copy of B-Form of minor (attested, if applicable) | <input type="checkbox"/> Copy of B-Form of minor (attested, if applicable) |
| <input type="checkbox"/> Guardian Certificate (if applicable) | <input type="checkbox"/> Guardian Certificate (if applicable) |

Institutional Applicants

- | | |
|--|---|
| <input type="checkbox"/> List of Authorized Signatories | <input type="checkbox"/> Memorandum and Articles of Association |
| <input type="checkbox"/> Board resolution authorizing investments and signatures | <input type="checkbox"/> CNIC / Passport copies of authorized signatories |
| <input type="checkbox"/> Trust deed in case of Provident / Employee contribution fund / Pension fund | |
| <input type="checkbox"/> By laws in case of welfare / Non profit organization | |



For further information contact us
Toll free: 0800-00887
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Email: ir@jsil.com
Web: www.jsil.com