

Systematic Investment Plan (SIP)
VIPB GROWTH FUND
APPLICATION FORM TO PURCHASE UNITS – INDIVIDUAL

(Please read the TERMS AND CONDITIONS overleaf; Fill up the Form in Block Letters)

To
Chief Executive Officer
VIPB Asset Management Company Limited
Suite 11(H), Police Plaza Concord, Tower 1
Level 11, Gulshan 1, Dhaka 1212.

Registration No.: _____
Sale No.: _____

I/We wish to enroll for a Systematic Investment Plan (SIP) of VIPB Growth Fund as per the details below:

SIP installment amount: Tk. _____ (In words: _____)
SIP periodic interval: Weekly Bi-Weekly Monthly Quarterly Half-Yearly Yearly
SIP tenure: _____ 1st payment date: _____ Regular payment day of the month: _____
SIP Payment mode: Bank cheque BEFTN Direct-debit mandate Dividend option: Cash CIP
1st payment details (if cheque): Bank: _____ Branch: _____ Cheque No.: _____ Cheque Issue date: _____
Auto renewal option: Yes No If No, then the matured amount will: Remain as invested Be transferred back to the investor

A. Principal Applicant

Registration No. (for existing unit holder only) _____
Name: _____
Father's/Husband's Name: _____
Mother's Name: _____
Date of Birth: _____ Occupation: _____
Nationality: _____ National ID no.: _____
Address: _____
BO A/C: _____
Telephone No.: _____ Fax No.: _____
E-mail: _____ Bank: _____
Branch: _____ A/C No.: _____
Bank Routing No.: _____ eTIN No.: _____

B. Joint Applicant

Name: _____
Father's/Husband's Name: _____
Mother's Name: _____
Date of Birth: _____ Occupation: _____
Nationality: _____ National ID no.: _____
Address: _____
Telephone No.: _____ Fax No.: _____
E-mail: _____ Signature: _____

C. Nominee

Name: _____
Father's/Husband's Name: _____
Mother's Name: _____
Relationship with principal applicant _____
Date of Birth: _____ Occupation: _____
Nationality: _____ National ID no.: _____
Address: _____
BO A/C: _____
Telephone No.: _____ Fax No.: _____
E-mail: _____ Signature: _____

Signature of Applicant(s)

Principal Applicant

Joint Applicant

Date of Application

TERMS AND CONDITIONS

1. The units of **VIPB Growth Fund**, hereinafter referred to as the Fund, may be bought /surrendered through **VIPB Asset Management Company Limited (VIPB AMCL)** and authorized selling agents appointed by **VIPB AMCL** from time to time. Surrender of units is allowed through **VIPB AMCL** or the selling agent from which the units are originally purchased.
2. Application must be made by an individual (both resident and non-resident), a corporation or company (both local and foreign), a trust or a society (registered in or outside of Bangladesh) and not by a firm, minor or persons of unsound mind.
3. Joint application by two persons is acceptable. In such a case, registration and issuance of unit allocation confirmation will be in favour of principal applicant while dividend and other benefits, if any, will be addressed to bank account of principal applicant mentioned in the application form. In case of the death of any of the joint holders, only the survivor shall be recognized as having any title to the units. On death of both the joint holders, the title to the units will bestow upon the nominee mentioned in the application form.
4. Minimum investment amount for individual investors is Tk. 2,000 (taka two thousand only) and for institutional investors is Tk. 5,000 (taka five thousand only).
5. Application for purchase of units should be accompanied by an account payee cheque/pay order/bank draft in favor of “**VIPB Growth Fund**” for the total value of units.
6. After clearance/encashment of cheque/draft/pay order the applicant will be issued with a confirmation of unit allocation for every purchase with a denomination of number of units he/she/the Institutional investor applies for. If BO A/C is provided during the registration, the units will also be delivered to the unit holder’s BO A/C in demat form.
7. The units may be transferred by way of inheritance/gift and/or by specific operation of the law. In case of transfer the Fund will charge a nominal fee as decided by **VIPB AMCL** from time to time except in the case of transfer by way of inheritance.
8. Dividend may be delivered in cash or by way of units under Cumulative Investment Plan (CIP) as the applicant gives option in the application form.
10. All payments /receipts in connection with or arising out of transactions in the Units hereby applied for shall be in Bangladeshi Taka.
11. Investment through SIP is subject to the terms defined in ‘SIP Brochure’ at the time of initiating the investment in VIPB Growth Fund. VIPB Asset Management Company Limited reserves the right to change any of the terms as per regulatory requirements.

FOR OFFICIAL USE ONLY

Registration No.: _____

Date: _____

No. of Units: _____

Sale No.: _____

Unit Allocation Confirmation No.: _____

Sign and Seal of Issuing Office

I/we confirm that I/we have received the unit allocation confirmation mentioned above and also that I/we have read, understood and agree to abide by the terms set out above as may be altered, replaced and modified from time to time by VIPB Asset Management Company Limited.

Signature of the Applicant(s)

Systematic Investment Plan (SIP)

VIPB GROWTH FUND

BEFTN DIRECT DEBIT AUTHORIZATION FOR SIP INSTALMENT COLLECTION

(Please read the TERMS AND CONDITIONS overleaf; Fill up the Form in Block Letters)

A. Investor's Bank & SIP Details (to be filled by the investor):

Investor's bank account name: _____
Investor's bank account number: _____
Bank name: _____
Branch name: _____ Routing number: _____
Direct debit amount: Tk. _____ (In words: _____)
SIP tenure: _____ 1st payment date: _____ Regular payment day of the month: _____
1st Payment mode: Bank cheque Online fund transfer
1st payment details (if cheque): Bank: _____ Branch: _____ Cheque No: _____ Cheque Issue date: _____
Direct debit start date: _____ Direct debit end date: _____
Direct debit/SIP interval: Weekly Bi-Weekly Monthly Quarterly Half-Yearly Yearly
Contact No: _____

B. Collection Bank Details (to be filled by VIPB AMCL):

Collection bank name: SOUTHEAST BANK PLC
Branch name: GULSHAN Routing number: 205261723
Collection bank account name: VIPB GROWTH FUND Collection bank account number: 001350000001

I/we, maintaining an account with the above-mentioned bank, hereby would like to inform you that I/we have authorized VIPB Growth Fund (as mentioned above) to debit my/our account through BEFTN not exceeding the above-mentioned amount. The BEFTN debit transaction will be initiated by the designated Collection Bank at the instruction of VIPB Growth Fund managed by VIPB Asset Management Company Limited. The account shall be debited at the interval as stated above and the instruction shall be valid from the direct debit start date to direct debit end date as mentioned above. This is for your kind information and support in this regard.

I have read and understood the "Terms and Conditions of Payment through BEFTN Direct-Debit Process" (as mentioned in the opposite page) which may be altered, modified and replaced from time to time by VIPB AMCL as per regulatory requirements.

Signature of Applicant(s)

_____ **Principal Applicant** _____ **Joint Applicant** _____ **Date of Application**

C. Applicant's Bank Details (to be filled by Applicant's Bank):

Bank name: _____
Branch name: _____ Routing number: _____
Branch telephone/contact number: _____ Branch email address: _____

I/We confirm that the Account Holder(s) is/are maintaining the above-mentioned account with our Bank and also confirm that the information provided by the above-mentioned applicant(s) is correct and signature(s) of the account holder(s) is/are matched.

_____ **Bank Seal** _____ **Signature of Authorized Bank Official**

Name of the authorized person of the bank: _____
Contact No: _____ Date of the authorization: _____

TERMS AND CONDITIONS FOR PAYMENT THROUGH BEFTN DIRECT-DEBIT FACILITY

Transaction under this Authorization will be subject to the BEFTN operating rules of Bangladesh Bank. All the BEFTN guidelines from Bangladesh will be imposed on executing the above instruction, as applicable from time to time. **VIPB AMCL** contains all the rights to change/modify/amend the following terms and conditions. The guidelines of Bangladesh Bank BEFTN shall govern with the following terms and conditions:

1. BEFTN Debit Facility for Installment payment can be availed after the SIP is accepted and is in force. Payments other than Installment or arrears of Installment (due on the previous month) should be paid via cheque/bank draft/pay order/online transfer; it cannot be paid through BEFTN debit.
2. This Authorization Form must reach **VIPB AMCL** at least 10 (ten) working days before the date on which it is to be activated. If the payment instruction date falls on weekend or a public holiday, the same may be effective on the immediate next working day.
3. This instruction shall stay fully in force and result till otherwise suggested in writing by the account-holder and such endorsement should be communicated to and received by a minimum of 10 (ten) working days before next installment payment is due. Any such amendment/cancellation will not release the investor from liability to the Bank arising on account of the bank having executed the instruction before receipt of such amendments/cancellation.
4. Investor should ensure that sufficient funds are available in the bank account at the time of debit date and this authorization is not dishonored. Sometimes it is possible that due to some technical or other reason, SIP installment is not debited on the debit date and is delayed for few days. Please ensure the availability of fund for at least 5 (five) working days after debit date to avoid any dishonors. **VIPB Growth Fund** will not be responsible for any dishonors raised by the bank and any dispute regarding same should be taken up with the bank only.
5. In case this Authorization is dishonored by the bank, installment for the due date(s) of the dishonored BEFTN debit for the previous month has to be paid in Cheque/Pay Order/Demand Draft/Online Fund Transfer by the investor. Any issue regarding dishonor of his authorization is to be taken up with the bank only.
6. Any queries, questions, comments etc. with regards to **VIPB Growth Fund** and payment amount will have to be raised to **VIPB Growth Fund** and payments to the bank with regard to the settlement of amounts paid in this regard are committed and not deferrable for any reason whatsoever. The transaction appearing on the account statement will be the proof of payment.
7. Under this instruction, the investor cannot dispute regarding the payment to **VIPB Growth Fund** debited from his/her bank account. If any excess or less than the correct amount is debited, the investor will have to contact **VIPB AMCL** for clarification. Any type of refund from **VIPB Growth Fund** on account of this instruction will be settled by **VIPB Growth Fund** to its investor.
8. No SIP installment receipt will be issued by **VIPB Growth Fund** for BEFTN debit payments. An annual statement or certificate of SIP payments, (as applicable), may be obtained from **VIPB AMCL** upon written request of the investor.

Signature of Applicant(s)

Principal Applicant

Joint Applicant

Date of Application