

Unit Trust Application Form For Individuals

Please select appropriate Unit	Trust Fund						
Senfin Growth			Senfin Money Marke	t Fund			
Senfin Shariah Balanced Fund Senfin Dynamic Income Fund			Senfin Shariah Income FundSenfin Dividend Fund				
Sentin Dynamic	c Income runa		Sentin Dividend Fund				
Please read the instructions be tick ($$) in the boxes appropriate		Application Form. The Form must	t be completed in full and in BLC	OCK CAPITAL LETTERS. Please			
Account Type		Individual	Joint	Minor			
Operating Instructions for	Joint Account	Sole/First Applicant	Both Parties	Either Party			
Particulars of Sole/Fi	rst Applicant/Mino	r					
Title Miss	Mrs.	Mr. Rev. Ot	her				
Full name as it appears in t	he NIC/Passport (under	line last name)					
NIC No./Passport No.			Date of Birth	D M M Y Y Y			
Nationality	Sri Lankar	Non-Sri Lankar	n (please state nationality)				
Residency Status	Resident	Non-Resident					
Permanent Address		110111100100110					
Correspondence Address (if	f different from above)						
Contact Details	Home	Busines	SS	Facsimile			
	Mobile	E-mail					
Occupation/Nature of Busin	ness (if self- employed)						
Name of Employer/Busines	, ,						
Employer's Address/Busine			500 000 1 11/5 4 000 000	0 11/0 1 000 000			
Expected value of investme			R 500,000 to LKR 1,000,000	Over LKR 1,000,000			
Source of Income	S	alary Business profit	Other (please speci	fy)			
Other connected business interests/professional activities							
Are you or any member of	your family a politically	exposed person(PEP)					
If yes please state the relat							
Particulars of Second	Applicant / Guardi	an					
Title Miss	Mrs.	Mr. Rev. Ot	her				
Full name as it appears in t	he NIC/Passport (under	line last name)					
NIC No./Passport No.			Date of Birth	DMMYYYY			
Nationality	Sri Lankar	n Non-Sri Lankar	n (please state nationality)				
Residency Status	Resident	Non-Resident					
Permanent Address							
Correspondence Address (if	f different from above)						
	r different from above)						
Contact Details	Home	Busines	SS	Facsimile			
	Mobile	E-mail					
Occupation/Nature of Busin	ness (if self-employed)						
Name of Employer/Busines	S						
Employer's Address/Busine	ss Address						
Expected value of investme		Up to LKR 500,000 LKF	R 500,000 to LKR 1,000,000	Over LKR 1,000,000			
Source of Income		alary Business profit					
Other connected business in				,,			
Carici Commected Dubiness II	rica caca, professional ac						

Bank Account Details of First Applicant /Guardian							
Bank Name							
Branch Address							
Account No. Account Type:	Current Sav	rings IIA					
E-mail Communication							
I/We wish to receive the following documents via email in lieu of ph	vsical document(s)	Yes No					
If Yes Account Statement All other Statutory Communications Marketing Updates							
	,	3 1					
Declaration and Signatures							
I. I/We declare that all information in this Unit Trust Application Form and in all documents that have been or will be signed by me/us in connection with this investment whether in my/our handwriting or not are true and accurate and form the basis of this Agreement.							
II. I/We have read and fully understood the Terms and Conditions in the Explanatory Memorandum pertaining to the Units that may be issued pursuant to this Application Form and agree to be bound by the aforementioned notes.							
III. I/We hereby agree to accept and to be bound by the provisions of the Trust Deed as amended from time to time.IV. I/We confirm that this investment is made on the understanding that prices of Units could move up as well as down from time to time due to market fluctuations as explained in the Explanatory Memorandum.							
 V. I/We am/are aware of the fees and charges that will be incurred directly or indirectly when investing in the Fund. VI. I/We authorize Senfin Asset Management (Pvt) Ltd (Fund Manager) to accept instructions by facsimile or registered email and hereby waive any claim that I/we may have against the Fund Manager and indemnify the Fund Manager against any loss incurred as a result of the Fund Manager receiving and/or acting upon such facsimile/email which have been originated by us or purported to have been originated by me/us. 							
VII. I/We agree that the Fund Manager reserves the right to reject, withdraw or terminate forthwith without notice my/our application without assigning any reasons thereto and recover related costs and /or other expenses pertaining to this account and under no circumstances shall Fund Manager be liable for any loss or damages for such action. VIII. For Non-Resident Applicants I/We declare that I/we am/are resident outside Sri Lanka at the time of opening of this account and further declare that the funds to be invested for the purchase of Units in any issue or transactions with the Fund Manager shall be made only out of or into an Inward Remittance Account (IIA) or an account maintained in a licensed commercial bank in Sri Lanka.							
Signature of Sole/First Applicant	Signature of Second Ap	oplicant/Guardian					
Date D M M Y Y Y							
Instructions							
 Please read the Fund's Explanatory Memorandum before completing this Application Form. Duly completed Application Form can be forwarded to the office of Senfin Asset Management (Pvt) Ltd. or through any authorized marketing agent appointed by Senfin Asset Management (Pvt) Ltd. Any change of contact details /bank account details should be notified immediately in writing to the Registrar at Senfin Asset Management (Pvt) Ltd, No 267, Galle Road, Colombo 03, Sri Lanka. Investment of a Minor (individuals under the age of 18) should always be accompanied by a Guardian as a Joint Holder and Guardian should sign the Application Form. Redemptions can only be done after Minor attains 18 years of age. Applications must be made on this Form. Exact size photocopies of this Form may also be used. Payments for the purchase of Units by Non-Resident applicants can be through an Inward Investment Account (IIA) or an account maintained in foreign currency at a licensed commercial bank. Each Unit Trust Application Form should be submitted with the following documents: A copy of NIC/Passport/Driving Licence If current residential address is different to the address stated in NIC/Passport, please provide a bank/credit card statement or utility bill not older than three months from the date of this Application Form III. In the case of an Application made under Power of Attorney (POA), a copy of the POA certified by a Notary Public IV. In the case of an Application made in the name of a Minor, a copy of the Birth Certificate of the Minor V. Bank Detail Proof Document VI. Completed Investment Form 							
Distributor Information (To be filled by Agents / Brokers)	_	Agont/Proker Cool					
Name	^F	Agent/Broker Seal					
For Office Hee Only							
For Office Use Only							
Application No.	Check List	Sole/First	Second/Guardian				
Unit Holder Reg. No.	Mandatory Details						
Unit Holder Acc. No.	NIC / Passport Address Verification						
Verifying Officer	POA						
Authorized By	100	I					