

## Unit Trust Application Form For Individuals

Please select appropriate Unit Trust Fund Senfin Growth Fund **Senfin Money Market Fund Senfin Shariah Balanced Fund** Senfin Shariah Income Fund **Senfin Dynamic Income Fund Senfin Dividend Fund Senfin Insurance Sector Fund Senfin Financial Services Fund** Senfin Consumer Staples Fund Please read the instructions below before completing this Application Form. The Form must be completed in full and in BLOCK CAPITAL LETTERS. Please tick  $(\sqrt{})$  in the boxes appropriate to you. Account Type Individual Joint Minor Operating Instructions for Joint Account Sole/First Applicant **Both Parties** Either Party Particulars of Sole/First Applicant/Minor Title Mr. Other Miss Mrs. Rev. Full name as it appears in the NIC/Passport (underline last name) NIC No./Passport No. Date of Birth Sri Lankan Non-Sri Lankan (please state nationality) Nationality Resident Non-Resident Residency Status Permanent Address Correspondence Address (if different from above) Contact Details Home **Business** Facsimile Mobile E-mail Occupation/Nature of Business (if self- employed) Name of Employer/Business Employer's Address/Business Address Up to LKR 500,000 LKR 500,000 to LKR 1,000,000 Over LKR 1,000,000 Expected value of investment per annum Business profit Other (please specify) Source of Income Other connected business interests/professional activities Are you or any member of your family a politically exposed person(PEP) If yes please state the relationship Particulars of Second Applicant / Guardian Title Miss Mrs. Mr. Other Rev. Full name as it appears in the NIC/Passport (underline last name) Date of Birth NIC No./Passport No. Sri Lankan Non-Sri Lankan (please state nationality) Nationality Resident Non-Resident Residency Status Permanent Address Correspondence Address (if different from above) Contact Details Facsimile **Business** Home Mobile E-mail Occupation/Nature of Business (if self-employed) Name of Employer/Business Employer's Address/Business Address Expected value of investment per annum Up to LKR 500,000 LKR 500,000 to LKR 1,000,000 Over LKR 1,000,000 Source of Income Salary Business profit Other (please specify) Other connected business interests/professional activities

Bank Account Details of First Applicant /Guardian					
Bank Name					
Branch Address					
Account No. Account Type:		Current	Saving	IIA	
E-mail Communication					
I/We wish to receive the following documents via email in lieu of	physic	al document(	(s)	Yes No	0
If Yes Account Statement All other	er Stat	utory Commu	ınications	Marketing Upo	dates
Declaration and Signatures					
<ul> <li>I. I/We declare that all information in this Unit Trust Application Form and i with this investment whether in my/our handwriting or not are true and II.</li> <li>I. I/We have read and fully understood the Terms and Conditions in the E pursuant to this Application Form and agree to be bound by the aforeme IIII. I/We hereby agree to accept and to be bound by the provisions of the Ti.</li> <li>I. I/We confirm that this investment is made on the understanding that priluctuations as explained in the Explanatory Memorandum.</li> <li>V. I/We am/are aware of the fees and charges that will be incurred directly</li> <li>VI. I/We authorize Senfin Asset Management (Pvt) Ltd (Fund Manager) to a claim that I/we may have against the Fund Manager and indemnify the receiving and/or acting upon such facsimile/email which have been orig</li> <li>VII. I/We agree that the Fund Manager reserves the right to reject, withdraw any reasons thereto and recover related costs and /or other expenses posterior is any loss or damages for such action.</li> <li>VIII. For Non-Resident Applicants         I/We declare that I/we am/are resident outside Sri Lanka at the time of the purchase of Units in any issue or transactions with the Fund Manage account maintained in a licensed commercial bank in Sri Lanka.     </li> </ul>	I accura Explanate entioned rust Dec rices of ror indir accept in Fund Mainated to ror term ertaining	te and form the ory Memorandi I notes. ed as amended Units could moverectly when invenstructions by fanager against by us or purport minate forthwithing to this account g of this account be made only o	e basis of this um pertaining from time to to the up as well a sesting in the Function of the up and the up an	Agreement.  to the Units that may me. s down from time to the und. stered email and her ed as a result of the en originated by me/u e my/our application we obtain the control of the cont	time due to market  eby waive any Fund Manager is. without assigning Fund Manager be  to be invested for
Date DDMMYYYY					
Instructions					
<ol> <li>Please read the Fund's Explanatory Memorandum before completing this</li> <li>Duly completed Application Form can be forwarded to the office of Senfir appointed by Senfin Asset Management (Pvt) Ltd.</li> <li>Any change of contact details /bank account details should be notified in No 267,Galle Road, Colombo 03, Sri Lanka.</li> <li>Investment of a Minor (individuals under the age of 18) should always the Application Form. Redemptions can only be done after Minor attains 18 years.</li> <li>Applications must be made on this Form. Exact size photocopies of this Formagements for the purchase of Units by Non-Resident applicants can be the foreign currency at a licensed commercial bank.</li> <li>Each Unit Trust Application Form should be submitted with the following I. A copy of NIC/Passport</li> <li>II. If current residential address is different to the address stated in NII than three months from the date of this Application Form</li> <li>III. In the case of an Application made under Power of Attorney (POA), IV. In the case of an Application made in the name of a Minor, a copy of V. Completed Investment Form</li> </ol>	n Asset nmediat be accor years of form ma hrough docume C/Passp	Management (I sely in writing to mpanied by a Gage.  ay also be used an Inward Inventer:  cort, please provious of the POA cervice.	the Registrar uardian as a Jo stment Accour vide a bank/cre tified by a Not	at Senfin Asset Manacoint Holder and Guard	gement (Pvt) Ltd, dian should sign the maintained in
Distributor Information (To be filled by Agents /Broke	ers)				
Name			Agei	nt/Broker Seal	
For Office Use Only					
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Application No.		Check List		Sole/First	Second/Guardian
Unit Holder Reg. No. Unit Holder Acc. No.		1andatory Detai IIC / Passport	IS		

Verifying Officer Authorized By

Address Verification

POA