



LYNEAR WEALTH MANAGEMENT (PVT) LIMITED

Account Application Form - Corporate

Corporate Information

| | | | | | | | | | | | | |
|--------------------------------|-------------------------|--------------------------|------------------------|--------------------------|------------------------|--------------------------|---|-----------------------------|---------------------------------|--|--|--|
| Corporate Name: | | | | | | | | | | | | |
| Nature of Entity: | Private Limited Company | <input type="checkbox"/> | Public Limited Company | <input type="checkbox"/> | Other (please specify) | <input type="checkbox"/> | | | | | | |
| | Foreign Fund | <input type="checkbox"/> | Local Fund | <input type="checkbox"/> | | | | | | | | |
| Incorporation Date: | D | D | M | M | Y | Y | Y | Y | Company Registration No: | | | |
| Nature of Business: | | | | | | | | Country of Domicile: | | | | |
| Registered Address: | | | | | | | | | | | | |
| Country: | | | | | | | | Postal / Zip Code: | | | | |
| Correspondence Address: | | | | | | | | | | | | |
| Country: | | | | | | | | Postal / Zip Code: | | | | |
| E-mail: | | | | | | | | | | | | |
| Telephone: | | | | | | | | | | | | |

Contact Persons

| Name | Designation | E Mail | Telephone |
|------|-------------|--------|-----------|
| | | | |
| | | | |
| | | | |

Authorized Signatories

| Name | Designation | Signature |
|------|-------------|-----------|
| | | |
| | | |
| | | |

Know Your Customer (KYC) Profile

| | | | | | | |
|--|---|--------------------------|---------------------------------|--------------------------|---------------------|--------------------------|
| Source of Funds: | Business Profits / Turnover | <input type="checkbox"/> | Commission Income | <input type="checkbox"/> | Gift / Donation | <input type="checkbox"/> |
| | Local Fund | <input type="checkbox"/> | Rent Income | <input type="checkbox"/> | Investment Proceeds | <input type="checkbox"/> |
| | Sale of Asset | <input type="checkbox"/> | Other (please specify) | <input type="text"/> | | |
| Expected value of investment per annum: | Rs.1,000,000 to Rs. 5,000,0000 | <input type="checkbox"/> | Rs.20,000,000 to Rs.50,000,0000 | <input type="checkbox"/> | | |
| | Rs.5,000,000 to Rs.20,000,0000 | <input type="checkbox"/> | Rs.50,000,000 and above | <input type="checkbox"/> | | |
| Verification documents: | Certificate of Incorporation / Registration (Mandatory) | | | <input type="checkbox"/> | | |
| | Board Resolution (Mandatory) | | | <input type="checkbox"/> | | |
| Other* (please specify) | | <input type="text"/> | | | | |

* Other documents should be either proof of registered address / principal place of business or confirmation of accounts opened with CDS or a regulated financial institution.

Corporate Bank Account Details

| Bank Name | Account Name | Account Number | Branch Name | Swift Code |
|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Declaration

We hereby declare that the details furnished above are true and correct to the best of our knowledge and we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, we are aware that we may be held liable for it.

We authorise LYNEAR Wealth Management (Pvt) Limited to accept Subscription Request, Redemption Request and Switching Request between funds managed by the company via LYNEAR Wealth Unit Trust Investor Portal and/or email in order to transact Units on our behalf. We hereby undertake to indemnify and keep LYNEAR Wealth Management (Pvt) Limited, its, directors, officers and representatives indemnified against any loss, liability, damage, claim or demand incurred or sustained as a result of LYNEAR Wealth Management (Pvt) Limited acting upon such instructions which have been originated by us or purported to have been originated by us.

We understand that the value of units may fluctuate and capital gains or losses may occur due to market conditions.

We confirm that we have received, read and understood the Key Investor Information Document relating to the LYNEAR Wealth Unit Trust Fund that is being invested in.

Signature

| | | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| D | D | M | M | Y | Y | Y | Y |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Date

Name of Director:

Signature

| | | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| D | D | M | M | Y | Y | Y | Y |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Date

Name of Director:

Submit the Account Application Form as an un-editable PDF along with the Certificate of Incorporation / Registration and Board Resolution and any other supporting documents.