

Account Opening Form

(For Institutions Only)



General Instructions

1. Fill the form in block letters. Please do not overwrite as it might lead to errors in processing your application.
2. All fields are mandatory except for Official Use only.
3. Please tick in the appropriate box where applicable, otherwise mark N/A (Not Applicable).
4. It is the responsibility of the applicant to understand the general instructions, terms and conditions and risk disclosure mentioned in this form.
5. All cheques should be made in favor of MCBFSL Trustee 786 Smart Fund
6. Please submit complete documents including list of all directors on company letterhead, CNIC(s), Latest Audited Financial Statements, Memorandum and Articles of Association and Board Resolution along with this form.
7. Redemption proceeds will be made to the bank account as specified on this form only.
8. If assistance is required in filling this form, please contact us.

Date

Folio Number

Institutional Information

Name of Entity

Contact Person

Designation

NTN No.

Zakat Deduction

Yes

No

(If 'No' please attach affidavit)

Registered Office Address

Tel. (Res)

Tel. (Off)

Fax

Email(s)

Mobile

Bank Details

Bank Name

Account number

Branch Name & Address

City

Investment Details

Amount (Rs.)

Cheque/D.D/P.O No.

Amount in words

Profit Frequency

Monthly

Quarterly

Half-Yearly

Annually

To be deposited in Bank

To be paid by cheque or Demand Draft and sent to the registered address

(for Income Units please opt the payment frequency)

Cash Dividend Payment

To be reinvested for purchase of additional Units

To be deposited in Bank

To be paid by cheque and sent to the registered address

Bonus Units

Credited to account / folio OR

Deposit in bank account below

Cheque sent to registered address

Encashed at ex-bonus price

Bank Name and Branch

Account No.

Operational Instructions

To be signed by:

Single Signatory

All authorised signatories

Jointly (Any Two)

Others (Please specify)

Know Your Customer (KYC)

This section is meant and adopted to establish the identity of the client by using reliable, independent source of documents, data and information, under SECP Circular No.12 of 2009.

Customer Type Trust/Clubs/Associations/Societies/NGOs Government Organisation
 Joint Stock Company (Public, Private) District Government/Local Government Organisations
 Partnership (Registered/Unregistered) Foreign Missions/International
 Others (Please specify) _____

Nature of Business Import/Export Manufacturing Agriculture Trading Other

Name of Directors/Trustee/Partners

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

Customer Care

Delivering Account Statements By Post By Email Not required
 Frequency of Account Statements Monthly Quarterly
 Subscription to NAV Alerts By Email By SMS
 Frequency of NAV Alerts Daily Alternate Days Weekly
 Subscription to FMR Service By Post By Email Not required
 Subscription to view Online Account Statement Yes No (If yes) Email _____
 Financial Statements Email Hardcopy/Printed

Declaration and Signature

We request you to open our account in 786 Investments Limited as per the given details. We hereby acknowledge having read and understood the relevant Trust Deed, Offering Document and Associated Risks. We confirm that the information furnished by us herein, is true, correct and complete in all respects.

 Signature of Applicant
 Official Stamp (in case of Institutional Clients)

Authorised Signatories

Name	_____	CNIC	_____	Signature	_____
Name	_____	CNIC	_____	Signature	_____
Name	_____	CNIC	_____	Signature	_____

For Official Use Only

Form duly completed Relevant copies and documents attached

Distributor Code _____ Purchase ID. _____ Distributor Name _____
 Application Processed by _____ IT Updated on _____ User ID. _____
 Signature & Stamp _____

Provisional Receipt

Received Rs. _____ from _____ for sale of _____ Units of _____
 Name of Bank _____ Branch _____
 Date _____ Signature & Stamp _____