

APPLICATION FORM LUMP SUM INVESTMENT

Please complete all sections in BLOCK CAPITALS and ✓ where necessary

SECTION 1 – INVESTMENT DETAILS

I/We wish to invest Rs

(Amount in words) Rupees

In Units of AAMIL Mauritius Fund and enclose my/our remittance in favour of the fund.

I/We understand that Units will be allocated to me/us at the Issue Price calculated on the next issue Date following the reception and acceptance of my/our application form and remittance, at the office of the Registrar, AAMIL Asset Management Ltd, Suite 340-355 Barkly Wharf, Le Caudan Waterfront, Port Louis.

■ Minimum Investment is Rs 10,000

Please complete the sections below in BLOCK CAPITALS.

SECTION 2 – APPLICANT/S DETAILS

Individuals should fill in Part A ■ Joint applicants should fill in Parts A and B ■ Corporate applicants should fill in Part C

■ All applicants should fill Parts D, E, F and G

A. INDIVIDUAL APPLICANT

B. JOINT APPLICANT

Title: Mr Mrs Miss Minor

Title: Mr Mrs Miss Minor

Surname

Surname

Forenames

Forenames

Address

Address

Telephone
Email address*

Telephone
Email address*

Nic/Passport n°

Nic/Passport n°

Citizen / Non Citizen of Mauritius**

Citizen / Non Citizen of Mauritius**

Date of Birth / /

Date of Birth / /

Signature (Self/Proxy/Guardian)*

Signature (Self/Proxy/Guardian)*

Date / /

Date / /

* Please complete for any information to be received by email

**Delete As Appropriate

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 TEL: +230 210 1000 FAX: +230 210 2000 E-MAIL: info@aamil.com

AAMIL Asset Management Ltd is part of the AAMIL Group, a global financial services provider, and is licensed (OC00005942) and regulated by the Financial Services Commission (FSC) of the Republic of Mauritius

C. CORPORATE APPLICANT

NAME OF COMPANY /SOCIETE/

OTHER ENTITY*

ADDRESS

TELEPHONE

AUTHORISED

SIGNATURE: _____

SIGNATORY'S NAME: _____

CAPACITY: _____

COMPANY SEAL: _____

AUTHORISED

SIGNATURE: _____

SIGNATORY'S NAME: _____

CAPACITY: _____

COMPANY SEAL: _____

*Delete As Appropriate

D. INCOME DISTRIBUTION

Please arrange for my/our income distribution to be (Please tick as appropriate)

1. reinvested at the Issue Price ruling at the time of distribution, at no entry fee; or
2. paid to me/us by crossed cheque to my/our address; or
3. credited to the under-mentioned account after deducting any bank charges applicable.

(If no treatment preference is indicated, dividends will be reinvested).

ACCOUNT NO.

BANK

BRANCH

ADDRESS

SIGNATURE (S)

E. EMPLOYMENT DETAILS

Employment Status: Employed Self-Employed Retired Housewife Unemployed

If Other, please specify _____

If Employed / Self Employed:
 Your present occupation

Employer's Name and Address

Office E-mail Address

F. FINANCIAL DETAILS (If joint, combined Monthly Income)

Monthly income (MUR):	Fund derived mainly from		
Below Rs 10,000.00 <input type="checkbox"/>	Salary	<input type="checkbox"/>	
Rs 10,000.00 – Rs 20,000.00 <input type="checkbox"/>	Rental/Property sale	<input type="checkbox"/>	Savings <input type="checkbox"/>
Rs 20,001.00 – Rs 30,000.00 <input type="checkbox"/>	Inheritance/Gift	<input type="checkbox"/>	Loan <input type="checkbox"/>
Rs 30,001.00 – Rs 50,000.00 <input type="checkbox"/>	Dividend/Interest	<input type="checkbox"/>	Other <input type="checkbox"/>
Rs 50,001.00 – Rs 75,000.00 <input type="checkbox"/>	Maturing Investment/Sale of share	<input type="checkbox"/>	
Rs 75,001.00 – Rs 100,000.00 <input type="checkbox"/>	Lottery/Casino/Betting	<input type="checkbox"/>	
Above Rs 100,000.00 <input type="checkbox"/>	Retirement Benefits/Pension	<input type="checkbox"/>	

If Other, Please specify _____

G. HAVE YOU EVER BEEN CONVICTED OF ANY CRIME IN MAURITIUS OR ELSEWHERE OR ARE THERE ANY PROCEEDINGS NOW PENDING AGAINST YOU WHICH MAY LEAD TO SUCH A CONVICTION? YES NO

If yes, please specify _____

DECLARATION AND SIGNATURE

I/we declare that to the best of my/our knowledge and belief, the statements made in this application and any related documents are true and complete.

I/we agree/confirm that:

1. This application is made on the basis and subject to terms and conditions as set out in the Scheme Particulars. These terms and conditions are indicative and may change with market fluctuations. Structured transactions are complex in nature and I/we have taken independent tax and other professional/legal advice as deemed necessary before making such investments.
2. The monies being invested pursuant to this application are not proceeds of illegal/criminal activities and my/our investment is not designed to conceal such proceeds and to avoid prosecution for an offence.
3. All information provided is true and correct and I/we agree to inform of any change in the personal information provided.
4. I/we understand that I/we should make my/our own appraisal of the risks arising from the subscription to or acquisition and should consult to the extent necessary my/our own legal, financial, tax, accounting and other professional advisors in this respect prior to any subscription and acquisition.

Signature

Signature

Date

Date

DOCUMENTS TO BE SUBMITTED BY INDIVIDUALS

For Identity, kindly submit one of the following: National Identity Card/Passport/Original**or Certified copy* of Birth Certificate

For Address, kindly submit one of the following: Certified copy*/Original**Public Utility Bill (Less than 3 months old) or Bank Statement

* The following persons can certify:

A lawyer, notary, actuary or an accountant holding a recognized professional qualification, A serving police or customs officer, A member of the judiciary, A senior civil servant, An employee of an embassy or consulate of the country of issue of identity documentation, A director or secretary (holding a recognized professional qualification) of a regulated financial services business in Mauritius or in an equivalent jurisdiction, A commissioner of Oath.

**** original will be returned immediately**