

HFAML-ACME EMPLOYEES' UNIT FUND

Asset Manager: HF Asset Management Limited

APPLICATION FORM TO PURCHASE UNITS UNDER SYSTEMATIC INVESTMENT PLAN (SIP)

(Please read The Terms and Conditions hereinafter carefully)

To be filled in by the applicant(s)

(Please write clearly and delete words if not applicable)

Date:

The Managing Director & CEO
HF Asset Management Limited
138/1, Tejgaon Industrial Area
Dhaka- 1208

Dear Sir,

I/We enclose herewith Tk. (in words)
..... in Cheque/P.O./D.D. No. Date

Bank Branch and request you to sell
to me/us Units of **HFAML-ACME Employees' Unit Fund under Systematic Investment
Plan (SIP)** at the price of Tk. (i.e. at a discount of Tk. 0.10 per unit from ongoing sale
price of Tk. per Unit prevailing on the Sale Date). I/We do not hold/already hold Units
and my/our Registration No. is HFACMEUF/ and BO No.

I/We am/are not minor(s).I/We have read and understood the terms and conditions of the Deed of Trust, Prospectus and
Brochure of the Fund and agreed to be bound and governed by the same on availing/using any facility. I/we further agree not to
hold the Fund liable for any consequences in case of any of the below mentioned particulars being false, incorrect or
incomplete. I/we hereby undertake to inform the Asset Manager of any changes to the information provided herein below and
agree and accept that the Fund and its Asset Manager is not liable or responsible for any loss.

I/We understand that all payments in connection with or arising out of the Units hereby applied for shall be payable in
Bangladeshi Taka only including income distribution and/or re-purchase price as applicable. I/We the undersigned do hereby
declare that the money which is being invested for the purchase of unit certificates of **HFAML-ACME Employees' Unit Fund**
has been earned /collected from the source(s) declared herein.

The completed application forms are enclosed for your kind perusal and necessary action.

Signature of Principal Holder

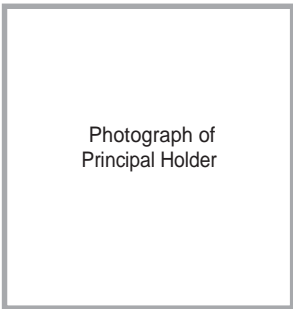
Signature of Joint Holder

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* For occupation classification please see Page 4
** Read Terms & Conditions on Page 4

HFAML-ACME EMPLOYEES' UNIT FUND

Asset Manager: HF Asset Management Limited



Photograph of
Principal Holder

PLEASE FILL UP THE FORM IN BLOCK LETTERS

PRINCIPAL HOLDER

Name :

Father's Name :

Mother's Name :

Spouse's Name :

* Occupation :

Designation :

Nationality :

Date of Birth :

National ID No. :

Passport No. :

e-TIN Certificate No. :

Birth Certificate No. :

Present Address :

Permanent Address :

B.O. Account No. :

Telephone No. :

Cell No. :

Email :

Source of Fund :

Bank Details :

A/C No. Routing No.

Bank Name Branch

Address

PARTICULARS OF SYSTEMATIC INVESTMENT PLAN (SIP)

SIP Tenor: 2 years Years (Not less than 2 years)

Interval of installment: Monthly Quarterly Half yearly Yearly

Installment amount Tk.:(In words: Taka.....)

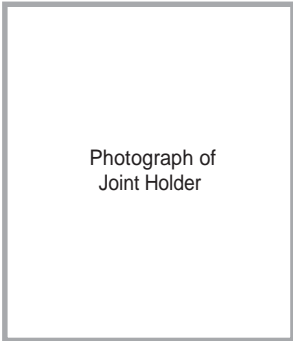
Mode of payment

Dividend Option: Cash CIP

Specimen signature of Principal Holder/
Authorized Person
www.hfassetmanagement.com

HFAML-ACME EMPLOYEES' UNIT FUND

Asset Manager: HF Asset Management Limited



Photograph of
Joint Holder

PLEASE FILL UP THE FORM IN BLOCK LETTERS

JOINT HOLDER

Name :

Father's Name :

Mother's Name :

Spouse's Name :

* Occupation :

Designation :

Nationality :

Date of Birth :

National ID No. :

Passport No. :

e-TIN Certificate No. :

Birth Certificate No. :

Present Address :

Permanent Address :

B. O. Account No. :

Telephone No. :

Cell No. :

Email :

Specimen signature of Joint Holder/Authorized Person

HFAML-ACME EMPLOYEES' UNIT FUND

Asset Manager: HF Asset Management Limited

** TERMS & CONDITIONS

1. The Units of HFAML-ACME Employees' Unit Fund, under Systematic Investment Plan (SIP) hereinafter referred to as the Fund, may be bought and surrendered through HF Asset Management Limited (HFAML) and authorized selling agents appointed by HFAML on all business days except Thursday and book closer period as declared by HFAML.
2. Application may be made by individual(s) and not by minor or person of unsound mind.
3. Joint application by two persons is acceptable. Registration and Unit allocation will be in favor of principal applicant while dividend and other benefits, if any, will be addressed to the bank account of principal applicant mentioned in the application form. In case of the death of any of the joint holders, only the survivor shall be recognized as having any title of the Units. On death of both the joint holder, the Units will bestow upon the nominee(s) if any mentioned in the Nominee Form [HFACMENF-1].
4. SIP Investor can start investment for Tk. 1000/2000/3000/4000/5000 or multiple of 1000/500
5. Application for purchase of Units should be accompanied by Account Payee Cheque/ Pay Order/ Bank Draft in favor of "HFAML-ACME Employees' Unit Fund".
6. After clearance/encashment of Cheque/Bank Draft/Pay Order, the applicant will be allocated Units of the Fund against every purchase with a denomination of number of units he/she applies for. The balance of units will also be credited to the unit holder's BO A/C in demat form.
7. Purchase of units on interval to invest as mentioned in application form, the unit holder will be issued with a new Confirmation of Unit Allocation representing the balance of Unit Holding.
8. The units may be transferred by way of inheritance/gift and/or by specific operation of the law. In case of transfer the fund will charge a nominal fee as decided by the Asset Manager from time to time except in the case of transfer by way of inheritance.
9. Unit holders may split their Unit Certificates subject to minimum denomination of 100 (One hundred) units. In case of split, the fund will charge a nominal fee as decided by HFAML from time to time.
10. Dividend may be delivered in cash or by way of Units under Cumulative Investment Plan (CIP) or mix of both as the applicant has mentioned in the application form.
11. All payments/receipts in connection with or arising out of transactions in the Units hereby applied for shall be in Bangladeshi Taka.
12. An investor can purchase units, through SIP either by auto debit system provided against his/her bank account or by providing cheques.
13. Under SIP, there will be no lot size like normal investors;
14. An SIP investor can set SIP tenor for 2 years/3 years/5 years/10 years, but not less than 2 years.
15. An SIP investor can terminate/discontinue his/her SIP in any time. If he/ she wants to terminate/discontinue the SIP before 2 (two) years, 1% discount from the re-purchase/surrender price will be applicable from total accumulated invested amount on the date of cancellation of the scheme.
16. An SIP investor can purchase units of HFAML-ACME Employees' Unit Fund at the regular interval by contributions affixed amount and at a discount of TK. 0.10 per unit from the ongoing weekly sale price of the unit.
17. An SIP investor can continue his/her plan after maturity of SIP Tenor;
18. SIP investor are not penalized for missing up to 2 (two) installments. If he/she fail to pay more than two installments consecutively, the premium offered at the time of surrender on maturity will not be applicable for him/her.
19. Any fraction amount remaining will be converted when it sums up to one unit under SIP.
20. Occupation may be classified as under (please tick appropriately)

<input type="checkbox"/> a. Civilian <input type="checkbox"/> b. Govt. Salaried <input type="checkbox"/> c. Non-Govt. Service Holder <input type="checkbox"/> d. Defense Person <input type="checkbox"/> e. Professions-Legal, Medical and Engineering etc. <input type="checkbox"/> f. Retired Person <input type="checkbox"/> g. Businessman	<input type="checkbox"/> h. Agriculturist <input type="checkbox"/> i. House-Wife <input type="checkbox"/> j. Working Woman <input type="checkbox"/> k. Worker <input type="checkbox"/> l. Student <input type="checkbox"/> m. Scientist <input type="checkbox"/> n. Miscellaneous
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21. Documents enclosed

<input type="checkbox"/> a. e-TIN Certificate <input type="checkbox"/> b. Passport (Photocopy of first pages)	<input type="checkbox"/> c. National ID <input type="checkbox"/> d. Birth Certificate
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Signature of Principal Holder/
Authorized Person with date

Signature of Joint Holder (if any)/
Authorized Person with date

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