

Sub Distributor:

Account No. _____
(For Existing Unit Holders Only)

Transaction Type

- ☐ Investment (SA)
- ☐ Regular Savings Plan (RSP)
- ☐ Redemption/Cooling-Off (RD/CO)
- ☐ Switching / Redemption&Re-Investment (SW / RD&SA)
- ☐ Transfer (TR)

This Form should not be circulated unless accompanied by the relevant Prospectus(es)/Information Memorandum(s). Investor(s) are advised to read and understand the contents of the relevant Prospectus(es)/Information Memorandum(s) and Supplementary Prospectus(es)/ Information Memorandum(s), if any before completing this Form. Please complete in BLOCK LETTERS only, and tick (X) where applicable. For 1st time investors, please fill up the Application Form to be submitted with this Form.

CORPORATE APPLICANT

Name of Corporate Applicant

[illegible]

Company/Registration No. _____ Tel _____ - _____

DETAILS OF INVESTMENT APPLICATION (SA)[illegible]²Specify the currency acronym eg. MYR etc**DECLARATION (FOR WHOLESALE FUNDS ONLY)**

I/We confirm my/our above instructions:

I/We confirm that I/We meet the criteria of sophisticated investor as stated in Schedule 6 and 7 of Capital Markets and Services Act (CMSA) 2007:-

My company is:

- a corporation with total net assets exceeding MYR10 million or its equivalent in foreign currencies based on the last audited accounts, **OR**
- a partnership with total net assets exceeding MYR10 million or its equivalent in foreign currencies.

Authorised Signatory(ies)

Name

Date _____

Authorised Signatory(ies)

Name

Date _____

To be signed by authorised signatories as indicated in the List of Authorised Signatories provided and to affix company's rubber stamp.



CASH INVESTMENT PAYMENT OPTIONS

Notes to be read before completing this section:

- Cheque / bank drafts should be crossed and made payable to "**Kenanga Investment Bank Berhad**" and must be drawn on a bank located in Malaysia. You should write the Company's Name and Company / Registration No. on the back of each cheque. The cheque(s) / bank draft(s) must be attached with this Form.
- Please attach a copy of the bank-in slip or Direct Transfer form with this Form. It must clearly show the Company's Name, Company / Registration No. and amount remitted.

Cash / Cheque Deposit / Fund Transfer, kindly deposit into Maybank Berhad Acc. No.: 514356-505908

Cheque/Bank Draft No. payable to **"Kenanga Investment Bank Berhad"**

Debit from my KIBB Trust Account available balance Client Code:

Loan (RM)	Bank Name	Branch
10000	Bank A	Branch 1
20000	Bank B	Branch 2
30000	Bank C	Branch 3
40000	Bank D	Branch 4
50000	Bank E	Branch 5
60000	Bank F	Branch 6
70000	Bank G	Branch 7
80000	Bank H	Branch 8
90000	Bank I	Branch 9
100000	Bank J	Branch 10

I/We declare that I / we have read and understood the contents of the "Loan Financing Risk Disclosure Statement" available in the "KIBB UT Account Opening Form"

DETAILS OF STANDING INSTRUCTION APPLICATION (SI) - for Regular Savings Plan (RSP)

If you are investing via Standing Instruction, kindly fill up the Direct Debit Authorization Form and attach it with this Form.

Fund Name	Investment Management Company	¹ Entry Fee (%)	² Currency	Investment Amount	Deduction Date (for ³ Standing Instruction Only)
1)					<input type="checkbox"/> 15th <input type="checkbox"/> 28th
2)					<input type="checkbox"/> 15th <input type="checkbox"/> 28th
3)					<input type="checkbox"/> 15th <input type="checkbox"/> 28th
4)					<input type="checkbox"/> 15th <input type="checkbox"/> 28th
5)					<input type="checkbox"/> 15th <input type="checkbox"/> 28th
			TOTAL		

²Specify the currency acronym eg. MYR etc

Bank Account Name _____ Bank Account No _____

Bank Name _____

DETAILS OF SWITCHING / REDEMPTION & RE-INVESTMENT APPLICATION (SW / RD & SA)

Please ensure you maintain the minimum amount required in the original Fund as stated in the relevant Prospectus(es)/Information Memorandum(s) if partial switching is selected. Switching in between different Unit Trust Management Companies ("UTMCs") will be treated as Redeem and Re-Investment.

Fund Name (From / SWO / RD)	Full SW/RD	² Currency	Partial Switching / Redemption (indicate no. of Units or Amount)	Fund Name (To / SWI / SA)	Fee (if any)
1)	<input type="checkbox"/>				
2)	<input type="checkbox"/>				
3)	<input type="checkbox"/>				
4)	<input type="checkbox"/>				
5)	<input type="checkbox"/>				

²Specify the currency acronym eg. MYR etc

DETAILS OF TRANSFER (TR)

Please ensure you maintain the minimum amount required in the original Fund as stated in the relevant Prospectus(es)/Information Memorandum(s) if partial transfer is selected.

Fund Name / Account No. (From)	Full TR	² Currency	Partial Transfer (indicate no. of Units or Amount)	Account No. / UTMC (To)
1)	<input type="checkbox"/>			
2)	<input type="checkbox"/>			
3)	<input type="checkbox"/>			
4)	<input type="checkbox"/>			
5)	<input type="checkbox"/>			

²Specify the currency acronym eg. MYR etc

DETAILS OF REDEMPTION (RD) / COOLING-OFF (CO) APPLICATION

Please ensure you maintain the minimum amount required in the original Fund as stated in the relevant Prospectus(es)/Information Memorandum(s) if partial redemption is selected.

Fund Name	Full RD / CO	² Currency	Partial Redemption (indicate no. of Units or Amount)	Exit Fee (if any)
1)	<input type="checkbox"/>			
2)	<input type="checkbox"/>			
3)	<input type="checkbox"/>			
4)	<input type="checkbox"/>			
5)	<input type="checkbox"/>			
			TOTAL	

²Specify the currency acronym eg. MYR etc

CASH REDEMPTION PAYMENT INSTRUCTION (if applicable)

☐ Please debit my/our Client Trust Account maintained with KIBB and credit into my/our bank account number detailed below:

Bank Account Name _____ Bank Account No _____

Bank Name _____

DECLARATIONS AND SIGNATURES

- At my/our discretion, I/we have decided to purchase the fund(s) selected on this date. Before signing this application, I/we am/are aware of the fees and charges that incur directly or indirectly when investing in the Fund(s) and I/we have been informed and hereby fully understand the associated product risks and returns, and the fund(s) selected for purchase may be of higher risk than my/our profiled risk-taking ability.
 - I/we acknowledge that neither Kenanga Investment Bank Berhad ("KIBB") nor any other member company of the K&N Kenanga Group guarantees any particular returns for the investment.
 - I/we hereby also agree to be bound by all the terms and conditions pursuant to which KIBB and/or any of its agents affect any purchase, redemption and/or switching of any Funds as imposed from time to time.
 - I/we am/are aware of my/our cooling-off rights as an investor in accordance with the terms of the relevant Prospectus(us) of the respective funds is defined as "cooling-off".
 - I/we undertake to be bound by the provisions of the documents constituting the Fund(s) subscribed to as if I was/We were a party thereto.
 - I/we hereby declare and acknowledge that I/we have sole legal and proprietary right over all monies accompanying this application.
 - I/we instruct KIBB to debit my/our monies in Trust Account maintained by KIBB in relation to any transactions.
 - I/we instruct KIBB to credit all payment proceeds into my/our Trust Account maintained by KIBB and that no payment /crediting is to be paid to a third party account.
 - I/we instruct KIBB to reinvest all dividends declared on the Unit Trust Investment, if any.
 - I/we acknowledge that in the event the mode of payment for the investments is made by both cash and cheque, I/we agree that if the cheque is dishonored, KIBB is entitled not to submit my/our application for investments to the Unit Trust Management Company ("UTMC") entirely in its absolute discretion.
 - I/we acknowledge that redemption proceeds are paid to KIBB by the UTMC concerned and the KIBB cannot be held responsible or liable for any losses suffered directly or indirectly as a result of any failure by the UTMC concerned to pay the redemption proceeds to KIBB within any particular period of time.
 - I/we am/are aware that the Fund(s) is not insured by Perbadanan Insuran Deposit Malaysia ("PIDM") unless stated in the product sheet.
 - I/we hereby agree and irrevocably undertake to fully and completely indemnify KIBB, at all times and against all claims, demands, actions, suits, proceedings, losses, penalties, costs and expenses, whether arising directly or indirectly, which may be made or taken against KIBB or incurred or suffered by KIBB in connection with or in any manner out of KIBB acting or on my/our instruction(s) or consent(s) as stated above and any inaccuracy(ies) of the instruction(s) provided and declarations herein.
 - I/we hereby agree to indemnify and hold harmless KIBB nor any of its agents against any loss arising from the purchase, redemption, switching of the Funds save and except where such losses have been incurred as a result of gross negligence or willful breach of duty on the part of KIBB nor any of its agents.
 - I/we hereby also agree to indemnify KIBB and/or any of its agents in respect of any losses in the event of any delay or failing to comply with my/our intentions for the purchase, redemption and/or switching of the Fund(s) which is caused directly or indirectly by force majeure, Act of God, war, terrorism, industrial disputes, natural disaster, adverse weather conditions, failure of communication systems or any cause, event or circumstances beyond the control of KIBB and/or any of its agents.
 - I/we declare that all information given are correct and have not withheld any particulars which might prejudice my/our application.
 - I/we acknowledge that I/we shall keep KIBB informed of any changes to my/our particulars as stated.
 - I/we hereby acknowledge that KIBB has the right to reject an application at its absolute discretion without any reason.
 - Nothing in these terms and conditions or the exclusion of terms contained herein shall operate so as to exclude or restrict any liability, the exclusion or restriction of which is prohibited by the laws of Malaysia.
- ³These terms and conditions apply only to the Standing Instruction.
- I/we hereby acknowledged that there will be fee charges to the Debit Amount from my/our account for the MEPS Direct Debit Service. I/we hereby acknowledged that Direct Debit Authorization Form will take at least a minimum of twenty one (21) days for processing. I/we hereby agree to be bound by the Terms and Conditions specified in Direct Debit Authorization Form.

WITH THE COMPLETION AND EXECUTION OF THIS FORM, I/WE, THE ABOVENAMED UNITHOLDER(S), AGREE THAT ALL ELECTRONIC TRANSMITTED CONFIRMATION(S) ARE CONCLUSIVE AND IRREVOCABLE AS TO ITS TERMS AND CONTENTS. I/WE FURTHER ACKNOWLEDGE AND ACCEPT THAT ("KIBB"):

(a) IS HEREBY AUTHORISED AND HAS ABSOLUTE DISCRETION TO RELY ON ELECTRONIC TRANSMITTED CONFIRMATION FROM ME/US FOR MY/OUR SUBSEQUENT TRANSACTIONS WITH KIBB;

(b) SHALL NOT BE RESPONSIBLE OR INCUR ANY LIABILITY(IES) TO ME/US ARISING OUT OF OR IN CONNECTION WITH KIBB ACTING IN ACCORDANCE WITH THE ELECTRONIC TRANSMITTED CONFIRMATION(S), NOTWITHSTANDING ANY ERROR, MISUNDERSTANDING, FRAUD OR LACK OF CLARITY IN THE TERMS OF SUCH INSTRUCTION(S), AND WHETHER OR NOT SUCH ELECTRONIC TRANSMITTED CONFIRMATION(S) WAS MADE OR GIVEN WITH OR WITHOUT THE AUTHORISATION OF THE ABOVENAMED UNITHOLDER(S); AND

(c) I/WE FURTHER UNDERTAKE TO INDEMNIFY AND HOLD HARMLESS KIBB, ITS EMPLOYEES AND ITS UNIT TRUST CONSULTANTS AGAINST ALL COSTS, EXPENSES, LOSSES, LIABILITIES, CLAIMS AND DEMANDS ARISING OUT OF (WHETHER DIRECTLY OR INDIRECTLY OR IN CONNECTION WITH) KIBB HAVING ACTED ON THE ELECTRONIC TRANSMITTED CONFIRMATION(S). CANCELLATION OF REDEMPTION IS NOT ALLOWED ONCE THE REQUEST HAS BEEN FORWARDED TO KIBB.

ALL APPLICANTS MUST SIGN THIS FORM

Authorised Signatory(ies) Name Date

Authorised Signatory(ies) Name Date



To be signed by authorised signatories as indicated in the List of Authorised Signatories provided and to affix company's rubber stamp.

FOR UTC's USE ONLY

Reminder

A copy of the latest information and terms and conditions on this product(s) must be provided to the Applicant before submitting this application.

Acknowledgement

¹I hereby agree to have my commission adjusted accordingly for the sales transaction(s) / application with reduced entry fee (if applicable).

Branch Code _____ Name / Stamp of UTC _____ Code of UTC _____ Date _____

FOR OFFICE USE ONLY

Processed By & Date _____ Checked By & Date _____