



Investment Application Form for MFPPF Plans and Takaful Coverage Details

Al Meezan mein Itminan

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No.: AMIM-11-2023

Day	Month	Year

Portfolio No.:	
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NOTE: ALL FIELDS IN THE FORM ARE MANDATORY

Principal Account Holder												
Name (as per CNIC)												
Mr./Mrs./Ms./M/s:												
Contact No.:												

Selection of Plan (Please (✓) tick the appropriate Plan)			
<input type="checkbox"/> Education Savings Plan	<input type="checkbox"/> Education Savings Plan	<input type="checkbox"/> Home Builder Plan	<input type="checkbox"/> Hajj Savings Plan

Allocation Scheme			
<input type="checkbox"/> Moderate	<input type="checkbox"/> Aggressive	<input type="checkbox"/> Conservative	
<input type="checkbox"/> Plan Maturity and Term (Term of Plan (min 3 years / max 18 years))			
Date of first investment		Plan Maturity Date	

Investment Details			
Initial Investment Amount		Investment Amount in words	
Date	Cheque Number	Bank Name	Branch

Frequency of payment			
<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Semi-annually	<input type="checkbox"/> Annually
Mode of payment			
<input type="checkbox"/> Standing instruction from attached SIP	<input type="checkbox"/> Standing instruction to the employer to debit contribution from salary and credit in favor of scheme		

Cooling Off Rights for Investors

- Individual investor(s) can claim refund of their first time investment in a fund (cooling off right) along with deducted front end load (if any) within the cooling off period, however this refund will be subject to the deduction of any applicable contingent load (back end load) and taxes.
- Cooling off period shall be three business days commencing from the date of issuance of Investment Acknowledgment Letter.
- Refund can be obtained by submitting written request at any Al Meezan office/branch.
- The units held will be redeemed at the redemption price applicable on the date of submission of request (as per applicable cut off timings) and payment will be made within 6 business days.

Note:

- Please write your Portfolio No. (if any) or CNIC No. (In case of new investor) on the front of cheque.
- In any case cash will not be accepted. If the cheque is returned unpaid, the transaction of that day will be rejected.
- For Name and type of Funds please refer to the next page.
- Please prepare payment instrument - CDC Trustee (fund name/plan name)

Risk Profile of CIS/Plans	Risk Profile	Risk of Principal Erosion
Meezan Paaidaar Munafa Plan(s)	Very Low	Principal at Very Low Risk
Meezan Cash Fund Meezan Rozana Amdani Fund	Low	Principal at Low Risk
Meezan Daily Income Plan-I Meezan Sovereign Fund	Moderate	Principal at Moderate Risk
Meezan Capital Preservation Plan(s) Meezan Islamic Income Fund Meezan Strategic Allocation Fund II MFPPF-Conservative Allocation MFPPF-Moderate Allocation MFPPF-Very Conservative Allocation Meezan Balanced Fund	Medium	Principal at Medium Risk
Meezan Islamic Fund Al Meezan Mutual Fund KSE Meezan Index Fund Meezan Gold Fund Meezan Energy Fund Meezan Asset Allocation Fund MFPPF-Aggressive Allocation Meezan Strategic Allocation Fund (III)	High	Principal at High Risk

Declaration and Specimen Signature of Account Holder(s)

I/We hereby confirm that all information provided in this form is true and correct to the best of my/our knowledge. I/We confirm that the representative of Al Meezan/distributor has explained the features and risk of the product and I/we have understood these features and risks in which I/We have agreed to invest. I/We agree that I/we shall assume sole responsibility for determining the merits or suitability of any and all advice and/or recommendations of Al Meezan before relying on the same to enter into any transaction. I/We will not hold Al Meezan responsible for any loss which may occur as a result of my/our decision. I/We further confirm that I/We have read the Trust Deeds, Offering Documents, Supplemental Trust Deeds and Supplemental Offering Documents that govern these Investment transactions. I/We also confirm having the knowledge of applicable load percentages specified on the page 2 of this form.

Signatures of Principal/Joint Account Holder(s)

Note: Takaful coverage is subject to applicable terms & conditions and submission of all required documents. Further, coverage shall initiate subsequent to the clearance by the Takaful Company as per their underwriting criteria.

For Office Use only		
Information Regarding Takaful Coverage		
Takaful initiation date	Takaful coverage amount (Rs.)	Current applicable Takaful rate

Application Check List	
<input type="checkbox"/> Account Opening Form for individual (for New Investor)	<input type="checkbox"/> Health Declaration Form
<input type="checkbox"/> Conversion Form (in case of conversion from other funds/plans)	<input type="checkbox"/> SIP Form



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Form Received By	Name and Signatures of Reporting Agent	Order Authorized By
Signature and Stamp of Distributor	Reporting Date	Signature and Stamp of Transfer Agent
	Order Number	

TITLES FOR AL MEEZAN FAMILY OF FUNDS

NOTE: DETAILS OF NAME OF FUNDS, TYPE OF FUNDS AND ACCOUNT PAYEE TITLE

Meezan Financial Planning Fund of Funds-Plans	Allocation Scheme		Account Payee Title
	MIF (Equity)	MSF (Income)	
Meezan Financial Planning Fund of Funds (MFPF) Aggressive Allocation Plan	65%*	25%*	CDC Trustee MFPF Aggressive Allocation Plan
Meezan Financial Planning Fund of Funds (MFPF) Moderate Allocation Plan	45%*	45%*	CDC Trustee MFPF Moderate Allocation Plan
Meezan Financial Planning Fund of Funds (MFPF) Conservative Allocation Plan	20%*	70%*	CDC Trustee MFPF Conservative Allocation Plan

*Minimum Allocation

TAKAFUL RATE

Takaful premium Monthly contribution rate shall be 0.0092% (monthly) of outstanding Sum Covered for all eligible enrolled members. The contribution rate will be applicable to all Covered Members and is annually reviewable. Any revision in rates will automatically be applicable to all existing and new Members.

Note: Applicable from July 2019 onwards