



AL MEEZAN INVESTMENT MANAGEMENT LIMITED

**REQUEST FOR REGISTRATION OF UNITS UNDER LIEN
Form # AMIM-05**

No. AMIM-05-0001

Fund: _____

Date: _____
 Al Meezan Investment Management Limited
 (Management Company)
 Meezan Bank Limited
 (Transfer Agent)
 Karachi

Dear Sirs,

Re: Request for Registration of Units Under Lien

I/We _____
 being the registered unit holders under account # _____ request you to record pledge/ lien over the following units in favor of pledge/ lien holder(s) according to the provisions of the Trust Deed and the Offering Document of _____ Fund

| Number of units to be placed under lien | Certificate Numbers (If Issued) |
|---|---------------------------------|
| | |
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In making this request, I/We recognize and understand that:

- Payments of dividends or the issue of bonus Units and redemption proceeds of the Units under lien/charge/pledge shall be made to the lien/ charge / pledge holder for my/ our account
- You do not however, accept any responsibility for the validity of my/our act of placing the Pledged Units under lien nor for any obligations or commitments undertaken by me/ us in respect thereof.
- The lien on the Pledged Units shall continue till such time it is released by the lien-holder in writing.

Thanking you

Yours truly

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Name(s) and signature(s) of principal holder and joint holder(s) (if any)

Rubber stamp in case of corporate clients

| | | | |
|------------------|--|-----------|---------|
| Mr./Ms./Mrs./M/s | | Signature | NIC No. |
| Mr./Ms./Mrs./M/s | | Signature | NIC No. |
| Mr./Ms./Mrs./M/s | | Signature | NIC No. |
| Mr./Ms./Mrs./M/s | | Signature | NIC No. |

Particulars of Pledgee/ Lien Holder

Name: _____

Address: _____

Bank Account # _____ Name of Bank _____ Branch _____

Telephone _____ Fax Number _____ E-mail _____

Name(s) and signature(s) of first name pledge holder and joint pledgee(s) (if any)

| | | | |
|------------------|--|-----------|---------|
| Mr./Ms./Mrs./M/s | | Signature | NIC No. |
| Mr./Ms./Mrs./M/s | | Signature | NIC No. |
| Mr./Ms./Mrs./M/s | | Signature | NIC No. |
| Mr./Ms./Mrs./M/s | | Signature | NIC No. |

FOR OFFICIAL USE ONLY

APPLICATION CHECKLIST

- Unit Certificates (if issued) Board Resolution (authorizing pledge) Any Other Document (Specify)

| Distributor Name & Code | Date | Authorized Person | Authorized Signature |
|-------------------------|------|-------------------|----------------------|
| | | | |

FOR TRANSFER AGENT USE ONLY

| Sequential numbers (if any) | Date | Authorized Person | Authorized Signature |
|-----------------------------|------|-------------------|----------------------|
| | | | |

FOR MANAGEMENT COMPANY USE ONLY

| Authorized Person (1) | Authorized Signature | Authorized Person (2) | Authorized Signature & Date |
|-----------------------|----------------------|-----------------------|-----------------------------|
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