



# Al Meezan Investment Management Ltd.

## Meezan Tahaffuz Pension Fund

### CHANGE OF FUND MANAGER FORM

No. AMIM-PF08-0001

<b>INFORMATION ABOUT PARTICIPANT</b>			Date:
Name Mr./Ms./Mrs.:		Registration ID #:	
CNIC No.:	NTN No.:		
Mailing Address :			
City:	Postal Code:	Country:	Contact number:

<b>INFORMATION ABOUT NEW FUND MANAGER</b>	
Name of Pension Fund Manager	
Name of Pension Fund:	
Participant's ID with new Fund Manager:	
Bank Account No. of Pension Fund :	Bank name:
Branch name:	Tel. No.:
Address:	

<b>DETAIL OF TRANSFER AMOUNT</b>
<p>_____ Transfer whole amount and close my account with Al Meezan Investments      or</p> <p>_____ Transfer partial balance amount to above mention Fund Manager as per following details:</p> <p>                                % of total balance in MTPF equivalent to Rs. _____</p> <p>in words _____</p> <p>Please note that the above mentioned amount will directly be transferred to the new Fund Manager under the advice to the participant.</p>

<b>Effective date of transfer:</b>
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<b>Signature of Participant</b>
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<b>FOR OFFICIAL USE</b>			
Application Check List			
_____ Copy of CNIC		_____ Certificates (if issued)	
_____ Any other document (specify)			
Distributor code	Distributor name	DC Transaction serial no.	Transaction date
<b>Name of Authorized Person at Distribution Center</b>			<b>Authorized Signature</b>

<b>Remarks</b>

<b>FOR TRANSFER AGENT USE ONLY</b>			
Account number verified by	Signature verified by	Certificate verified and defaced by	Data input by

# Guidelines for completing Change of Fund Manager Form

This Form is required to be filled if Participant decides to transfer either whole or partial balance amount from MTPF to other Pension Fund Manager.

## INFORMATION ABOUT PARTICIPANT

1. Please make sure that all information mentioned in the form has been provided correctly.
2. Information about Registration ID, CNIC and NTN numbers is mandatory.

## INFORMATION ABOUT NEW FUND MANAGER

1. Mentioning name of new pension fund and Pension Fund Manager wherein participant is transferring his/her pension fund amount, is mandatory.
2. Pension Fund Account with new Fund Manager is also mandatory to mention in this form.
3. Please make sure that all information mentioned in the form has been provided correctly.

## DETAIL OF TRANSFER AMOUNT

1. If participant wants to transfer part of accumulated balance amount, exact amount being transferred along with its percentage with total accumulated balance will be mentioned.
2. Effective date of transfer of balance to New Fund Manager will be mentioned.

## OTHER INSTRUCTIONS

1. Participant is allowed to change Pension Fund Manager on the anniversary date of the opening of pension fund account in Meezan Tahaffuz Pension Fund.
2. Participant will inform Al Meezan Investment for change of Pension Fund Manager, 30 days prior to the date of anniversary.
3. Prior to submit this form, the participant is required to have pension fund account with other Pension Fund Manager where he/she wants to transfer balance of amount.
4. Without complete details and signature of Participant on form, the officer at distributor's office will not accept the form.
2. In case the Participant is illiterate and cannot sign, then he/she must be required to submit either a clear copy of CNIC with photo or one recent passport size photograph authenticated by his/her banker. His/her form would also need to be signed by two witnesses.

**If you have any questions or need additional information,  
please call: (92-21) 111-633-926 (111 – MEEZAN) or [marketing@almeezangroup.com](mailto:marketing@almeezangroup.com)**