

# INVESCI ASSET MANAGEMENT

ACCOUNT OPENING FORM

**PENSION FUND ACCOUNT OPENING FORM**

**INVESCI**  
THE SCIENCE OF INVESTMENT

### DOCUMENTS TO ATTACH:

1. Certified copy of ID for Trustees
2. Certified copy of Pension Fund Certificate
3. Completed INVESCI Pension Fund Mandate

### DETAILS OF THE PENSION FUND:

NAME OF PENSION FUND

REGISTRATION NUMBER

DATE OF INCORPORATION

INDUSTRY

### CONTACT DETAILS:

PHYSICAL ADDRESS

POSTAL ADDRESS

PHONE NUMBERS

EMAIL ADDRESS

WEBSITE

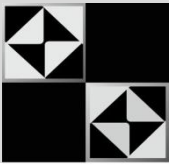
### CONTACT PERSON/S & CONTACT NUMBER/S:

1. NAME:

PH:

2. NAME:

PH:



**BANK ACCOUNT DETAILS:**

ACCOUNT NAME

BANK

BRANCH

BRANCH ADDRESS

BRANCH CODE

ACCOUNT NUMBER

SWIFT CODE

**PERSONAL DETAILS OF TRUSTEES:**

**TRUSTEE 1:**

FULL NAME

DESIGNATION

ID NUMBER

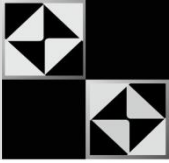
PASSPORT NUMBER

NATIONALITY

CONTACT NUMBER

RESIDENTIAL ADDRESS

EMAIL ADDRESS



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**TRUSTEE 2:**

	<input type="text"/>
DESIGNATION	<input type="text"/>
ID NUMBER	<input type="text"/>
PASSPORT NUMBER	<input type="text"/>
NATIONALITY	<input type="text"/>
CONTACT NUMBER	<input type="text"/>
RESIDENTIAL ADDRESS	<input type="text"/>
EMAIL ADDRESS	<input type="text"/>

**TERMS AND CONDITIONS**

Detailed Terms and Conditions can be found in the INVESCI Mandate Forms provided.

**DECLARATION**

I/We apply to open the above account with INVESCI Asset Management (Pvt) Ltd. ('INVESCI'). We represent that the information provided by us in this form and in any other document/s provided by us to INVESCI is true, accurate and complete. We acknowledge that INVESCI may decline our application without providing any reason in which event no contractual relationship will arise between INVESCI and us. We further agree that we have received, read and understood INVESCI's Terms and conditions as provided in the detailed mandate provided and we agree to be bound by them in connection with all accounts opened by us with INVESCI. We further agree to be bound by additional terms and conditions governing any facilities, products and/or services offered by INVESCI as we may apply for and/or utilise from time to time.

Authorised Signature

Authorised Signature

Name

Name

Date

Date



# INVESCI ASSET MANAGEMENT

## ACCOUNT OPENING FORM

### PENSION FUND ACCOUNT OPENING FORM

#### FOR OFFICIAL USE ONLY

Checked by:

Name:  Date:

**Clearance summary:**

Pension Fund Certificate

Copy of IDs

Pension Fund Mandate

Approved by:

Account number: