

Subscription Form



Folio No. (Existing Unit-holder only)

Application # **OAF** _____

1 Applicant Status Individual Company Pension Fund Mutual Fund Others (Specify) _____

2 Applicant Particulars (Fill the blanks with Capital Letters)

For Individual & Joint Applicants

	Name	ID Card No. (Omani)	Passport No. & Nationality (Non-Omani)
1			
2			

For Minors

Birth Certificate / Passport No.:

Guardian Name: _____ ID Card / Passport No.:

For Companies and Institutional Applicants

Name: _____

Contact Person's Name: _____ Commercial Registration No.: _____

3 Contact Details (To be filled by new Clients or by Existing Client in case of address change only)

PO Box: Postal Code: City: _____ Country: _____

Address: _____

Phone: _____

GSM: _____ Email: _____ Fax: _____

4 Subscription Details

Subscription Amount (RO) _____ Amount In Words: Rial _____

(Minimum Subscription RO 1,000/-. Please note that the number of Units issued will depend on prevailing NAV as of effective Valuation Day.)

OR

No. of Units Applied _____ In Words: _____

Payment Mode & Details: Cheque Bank Transfer Direct Debit

Cheque #: _____ Swift Code: _____ Account No.: _____

Account Title: _____

Bank: _____ Branch: _____

5 Dividend Preference Reinvest Dividend Pay Dividend

6 Bank Account Details (this account will be used for redemption proceeds)

Account Title: _____ Account No.: _____

Bank: _____ Branch: _____

Declaration

By signing this form I/we confirm and acknowledge having received, read, understood and accepted the terms and conditions in the Prospectus of **Oman Al Arabi Fund** dated October 7, 2009. I/we confirm that the information provided in this application form is correct, and I/we will be responsible for any consequences of any incorrect information provided by me/us.

Date Applicant 1 Signature Applicant 2 Signature Company Seal
(In case of Non-Individual)

FOR OFFICE USE ONLY

Transaction Date: ___ / ___ / ___ Price Subscribed at RO _____

No. of Units Issued _____ Bank Account. #: _____

Checked by _____ Approved by _____

ACKNOWLEDGEMENT SLIP

Application # **OAF** _____

We acknowledge the receipt from _____ a subscription form for Unit/RO _____ for subscription in Oman Al Arabi Fund.

Date: ___ / ___ / ___

Seal & Signature _____

Procedure for Filing the Subscription Form

- 1) The Subscription Form shall only be submitted at the office of Administrator of Oman Al Arabi Fund during the working hours on any Business day.
- 2) **Please read the Prospectus carefully before subscribing. Prospectus is available at our website: www.oabinvest.com. You can also collect a Prospectus from the office of Administrator of Oman Al Arabi Fund.**
- 3) Complete all required sections on the Application Form especially the Folio No. for existing Unit-holder.
- 4) Sign the Subscription Form
- 5) Mode of Payment:
 - a. Cheque will be prepared in favor of "Oman Al Arabi Fund"
 - b. In case of wire transfer the funds should be transferred to "Oman Arab Bank" in favor of "Oman Al Arabi Fund" account # **3101-919206-112**
- 6) The Subscription Form along with supporting documents can be faxed to Oman Arab Bank - Investment Management Group only in case of wire transfer or direct debit on **Fax #: +968 24 827 367** or **Email us at: OAF@oabinvest.com**
- 7) The Subscription Form along with necessary documents can be couriered to:

Oman Arab Bank - Investment Management Group
PO Box 2010, Ruwi, PC 112
Sultanate of Oman

Subscription Fee

The Fund may charge subscription fee up to 3% of the Net Asset Value, for covering market & distribution and sales expenses.

Basis of Rejection of Application

In following cases the Application Form will be rejected:

- 1 If the Subscription Form does not bear the signature of the subscriber.
- 2 In case of failure to pay the full value of the Units subscribed in accordance with the conditions provided for in the Prospectus.
- 3 If the value of the Units subscribed is paid through cheque and if the same is dishonored for any reason.
- 4 If the supporting documents referred to in the Prospectus and the Subscription Form for the subscription are not enclosed.
- 5 If the subscription form does not contain all the particulars of the bank account of the subscriber.
- 6 If any particulars of the bank account held by the subscriber as provided for in the Subscription Form are noted to be incorrect.
- 7 If the particulars of the bank account provided for in the Subscription Form are found to be not relevant to the subscriber, with the exception of the applications submitted in the name of minor children, who are allowed to make use of the particulars of the bank accounts held by their father.
- 8 In case of failure to have the Power of Attorney attached with the Application Form as provided for in the Oman Al Arabi Fund's Prospectus in respect of the person who subscribes and signs on behalf of another person (with the exception of a father who subscribes on behalf of his minor children).
- 9 If any legal or regulatory requirements are not met.

Application on behalf of Minor Children

- A For the purpose of this initial application, any person below 18 years of age as on last application date will be treated as a minor.
- B In case of minor children, only father is allowed to subscribe.
- C If the application is made on behalf of a minor by any person other than the father, he/she shall be required to attach a valid legal Power of Attorney issued by the competent authorities authorizing him/her to deal in the funds of the minor through sale, purchase and investment.

Documentation Required

- | | |
|--|---|
| <ol style="list-style-type: none"> 1) <i>Omani Applicants</i>
Valid copy of Identity Card / Passport
Birth Certificate for Minor
Bank Statement Copy 2) <i>Non-Omani Applicants</i>
Valid copy of Passport
Valid copy of Resident Card | <ol style="list-style-type: none"> 3) <i>Non-Individuals</i>
Birth Certificate for Minor
Bank Statement Copy
Certificate of Incorporation
List of Authorized Signatories
Bank Statement Copy |
|--|---|

Note: Applicants outside Oman should kindly authenticate all documents by their respective bank.

Allotment Notice

The Administrator will issue Unit allotment notification within two (2) business days from the relevant subscription day. The Administrator will allot the units after rounding down to the nearest integer based on the amount subscribed. The balance money will be refunded to the subscriber within two (2) business days, upon request.

Administrator



PO Box 2010, Ruwi, PC 112, Sultanate of Oman
Tel: +968 24754 317/494/340 Fax: +968 24 827 367