

Primary Identification

- ☐ 1. Original ID or Passport (Individual & Corporate Signatories)
- ☐ 2. PIN Certificate (Individuals & Corporate Signatories)
- ☐ 3. Certified Copies of Registration or Incorporation Certificate (Corporates)
- ☐ 4. Beneficial Owner declaration -CR12/CR13 C (Corporates)
- ☐ 5. One Passport Photograph (Individual & corporate signatories)
- ☐ 6. Copy of KRA PIN for Corporate Applicants
- ☐ 7. Proof of Payment-Bank Transfer/ Direct Deposit Confirmation
- ☐ 8. Copy of Recent Bank Statement, Void Cheque or ATM Card Mandate
- ☐ 9. Board Resolution Mandating Investment & Authorized Signatories (Body Corporates)
- ☐ 10. Proof of Funds for Individuals/Joint Applicants investing 1 million and above
- ☐ 11. Proof of Funds for companies/institutions investing 5 million and above

FOR OFFICIAL USE ONLY
Client/Portfolio Code

Currency: ☐ KES. ☐ USD.

Individual/ Joint Applicant 1

☐ Mr. ☐ Mrs. ☐ Miss. ☐ Ms. ☐ Mr. ☐ Dr. ☐ Prof. ☐ H.E. ☐ Hon. ☐ Other. _____

Name: _____

Date of birth: _____ ID/ Passport No. : _____

KRA PIN No.: _____ Tel No. : _____

Postal Address: _____ Postal Code: _____ Town/ City: _____ Country: _____

Mobile No. : _____ Email: _____

Nationality : _____ Signature : _____

Signature Mandate: ☐ Sole ☐ Either ☐ All to Sign ☐ Others (specify) _____

Individual/ Joint Applicant 2

☐ Mr. ☐ Mrs. ☐ Miss. ☐ Ms. ☐ Mr. ☐ Dr. ☐ Prof. ☐ H.E. ☐ Hon. ☐ Other. _____

Name: _____

Date of birth: _____ ID/ Passport No. : _____

KRA PIN No.: _____ Tel No. : _____

Postal Address: _____ Postal Code: _____ Town/ City: _____ Country: _____

Mobile No. : _____ Email: _____

Nationality : _____ Signature : _____

Signature Mandate: ☐ Sole ☐ Either ☐ All to Sign ☐ Others (specify) _____

Corporate Applicant

Company/ Organization name: _____

Registration number: _____ Postal code: _____

Contact person: _____ Position in organisation: _____

Tel No. : _____ Email: _____

Signature Mandate: ☐ Sole ☐ Either ☐ All to Sign ☐ Others (specify) _____

Authorized Signatories For Corporate Applicant

	Name	Position in Organization	ID/Passport No.	Signature
1.				
2.				
3.				
4.				
5.				

Source Of Funds

☐ Savings ☐ Dividends ☐ Sale of Investments ☐ Gifts/Inheritance ☐ Pension ☐ Donation

☐ Business Profits (Nature of Business) _____

☐ Others (specify) _____

Risk Assessment For Client Risk Profiling

<p>1. What is your primary investment objective?</p> <p><input type="checkbox"/> Capital preservation and safety of funds</p> <p><input type="checkbox"/> Regular income with low risk</p> <p><input type="checkbox"/> Growth with some risk tolerance</p>	<p>4. What proportion of your total investment portfolio will this money market fund represent?</p> <p><input type="checkbox"/> Less than 25%</p> <p><input type="checkbox"/> 25% to 50%</p> <p><input type="checkbox"/> More than 50%</p>
<p>2. What is your investment time horizon for this fund?</p> <p><input type="checkbox"/> Less than 6 months</p> <p><input type="checkbox"/> 6-12 months</p> <p><input type="checkbox"/> 1-3 years</p>	<p>5. Do you have an emergency fund or other liquid assets apart from this investment?</p> <p><input type="checkbox"/> Yes, I have sufficient funds</p> <p><input type="checkbox"/> I have some funds but limited</p> <p><input type="checkbox"/> No, this will be my only source of liquidity</p>
<p>3. How comfortable are you with potential fluctuations in returns, even if minimal?</p> <p><input type="checkbox"/> Not comfortable at all</p> <p><input type="checkbox"/> Somewhat comfortable</p> <p><input type="checkbox"/> Very comfortable with fluctuations</p>	<p>6. Have you previously invested in low-risk instruments such as Treasury Bills, Fixed Deposits, or Unit Trust Funds?</p> <p><input type="checkbox"/> Yes, I have experience in these products</p> <p><input type="checkbox"/> I have limited experience</p>

Fund Selection

GCIB Fund	Bank Details	Amount To Invest
GCIB Money Market Fund	Bank: I&M Account No. : 03604204381357 or Paybill No.: 4221888 Account No. : GMF Account Number i.e. (GMF01....)	
GCIB Fixed Income Fund <input type="checkbox"/> 3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/> 12 Months	Bank: I&M Account No. : 03604204381361 Branch: Spring Valley Swift code: IMBLKENA or Paybill No. : 4221888 Account No. : GMF Account Number i.e. (GMF01....)	

Payment method (specify)

☐ Cheque ☐ Bank Deposit ☐ Local Transfer ☐ International Transfer

GCIB accepts Personal/ Corporate and Bankers Cheques payable to the account name of the fund in which you intend to invest. No third-party cheques will be accepted. Payments should be made directly into the collection account and payment details must be attached to the application form. Please note that the Bank deposit slip will be deemed as a receipt but not as value by GCIB until funds are sighted in the account.

Income Distribution

Do you want to reinvest Interest/Dividend Income? ☐ Yes ☐ No

☐ If “No”, please send income distribution amounts to my Bank Account on file (please tick where applicable)

☐ Monthly ☐ Quarterly ☐ Semi annually

Client Bank Details

Account Name: _____

Bank Name : _____ Branch: _____

Currency: _____ Account No. : _____

Currency: _____ Account No. : _____

Statements and Other Correspondence

All statements, reports and notices will be sent through email. Please ensure your email is correctly entered. If no email address is provided statements, reports and notices will be sent by post to the postal address provided.

Beneficiary/Contact Person Details

	Name	Relationship	Address	ID/Passport No.	Tel No.	Split %
1.						
2.						
3.						
4.						

General Details

How did you hear about GCIB Unit Trust Funds?

☐ Media ☐ Referral: referred by : _____

☐ Internet ☐ Others (specify): _____

Politically Exposed Person (PEP) Status:

I confirm that I am / am not (circle appropriate) a Politically Exposed Person (PEP) and that I have / do not have **(Circle appropriate)** close associates or family members who are PEPs.

Email Indemnity

I/we refer to Investment(s) through this application form in the name of _____
in **GulfCap Investment Bank Limited (“the Company”)** and wish to advise and conform as follows:

1. That I/We hereby request and authorize the company to honour and act upon any and all instructions sent by internet, electronic mail and scanned copies of documentation for investment transaction with the company which have been issued or provided by Me/Us through the following email address

Email address: _____ Date: _____

2. The Company shall not be liable for having acted in good faith upon instructions purporting to come from Me/Us but which, is subsequently discovered to, or may emanate from unauthorized individuals or in any other circumstance whatsoever.

Physical Address Confirmation

Estate/House No./ Plot No. : _____ Date: _____

I/We are writing to conform that the above is a description of my/our residential address. A description has been provided as I do not have any utility bill that may be used to verify my current residential address.

Declarations

- I/We confirm that I/We received clear explanations and understanding on the investment product before signing.
- I/We confirm that the product was fully explained to Me/Us with particular attention having been paid to its charge structure and any possible cancellation penalties that I/We may incur.
- I/We confirm that it was explained to Me/Us that unit/fund values may go down as well and past performances are not necessarily a guide to future performance.
- Whilst projections of future performances may have been shown to me illustrating annual/monthly growth rate, no guarantees as to the actual performance of my investment were made.
- I/We apply to invest in the GCIB Unit Trust Fund on the terms, conditions and regulatory information set out in the Information Memorandum and Trust Deed.
- I/We confirm that the investment in the Fund is not being acquired directly or indirectly by or on behalf of any person restricted by law of any jurisdiction from acquiring such an investment and that I/We will not sell, transfer or otherwise dispose of any investment in the Fund directly or indirectly to or for the account of such person.
- I/We hereby agree that all proceeds for redemptions and income distribution will be paid in accordance to the applicable payment instructions.
- I/We confirm that the money used for investments in the GCIB Unit Trust are not arising out of proceeds of any money laundering or other illicit activities.
- I/We agree that GCIB is not responsible for any liability, losses or damages resulting from e-mail instructions, except when such liability or loss results from negligence, or willful default on GCIB's part.
- I/We warrant that all the information given in this proposal and in all documents which have been or will be signed by me/us in connection with proposed application whether in my handwriting or not, is true and complete.
- I/We hereby expressly acknowledge and agree that pursuant to the Foreign Account Tax Compliance Act (FATCA) enacted under the Laws of the United States of America (US), the Bank is or may be required for US citizens or residents to disclose and report certain information concerning my/our account to the relevant authorities including but not limited to the US Internal Revenue Service (“US Authorities”). Additionally, FATCA may require the Bank to deduct, withhold and remit such taxes or monies to the US Authorities as may be directed by them from time to time.
- I/We hereby expressly consent and authorize the Bank to disclose, respond, advise, exchange and communicate the details or information pertaining to my/our account(s) to the US Authorities and to deduct, withhold and remit such monies or taxes as may be directed by the US Authorities to enable the Bank to fulfil its obligations under FATCA and other enabling US statutes.
- I/We hereby irrevocably release and fully discharge GCIB, its directors, officers, employees, servants and agents and related parties from any and all claims, liabilities, damages, loss or expense arising from GCIB disclosing and reporting any such information concerning the Customer account(s) to the US Authorities and/or deducting, withholding and remitting any monies to the US Authorities.

- By signing up to the Fund, the Investor hereby agrees and consents to:
 1. The collection, use, processing and transfer by GCIB and any of its affiliates of certain personal information about the Investor (the “Data”);
 2. Any affiliates of GCIB transferring data amongst themselves for the purposes of implementing and/or administering the proposed investment;
 3. Use, processing and transfer by GCIB of the Data to its appointed advocates, its employees and/or any governmental competent authority for the implementation of the terms of the mandate;
 4. Use, processing and transfer by GCIB in fulfillment of any legal obligations under the laws of the Republic of Kenya or directive of any competent authority; and
 5. The transfer to and retention of such Data by third parties in connection with the aforesaid purposes.
- For the purposes of this clause, the term “Data” means the Investor’s name, date of birth, gender, postal address, physical home address, identification details and documentation, telephone number(s), email address, tax or other identification number and any other general personal information that may be provided to GCIB.

Declarations

I/We the undersigned, confirm that I/We have read and understood this declaration and its implications.

Name : _____ Signature: _____ Date: _____

Name : _____ Signature: _____ Date: _____

Name : _____ Signature: _____ Date: _____

For Internal Use

Investment Advisor: _____ Code : _____ Signature: _____

Reviewed by: _____ Branch: _____ Signature: _____

Approved by : _____ Signature: _____ Date: _____