

## **INVESTMENT APPLICATION FORM (IAF)**

15 <sup>th</sup> Floor PSE Tower, 5 <sup>th</sup> Avenue corner 28 <sup>th</sup> Street, Bonifacio Global City, Taguig City, 1634	DATE mm/dd/yyyy
(+632) 8250 8700  invest@philequity.net   ask@philequity.net  www.philequity.net	

INSTRUCTIONS: Please type all information in CAPITAL LETTERS. Fill out this form completely. Write N/A on fields that are not applicable and do not leave any blank spaces.

		TRAN	ISACTION DETAILS			
Account Name						
Account Number			Contact Number			
Investment Type	Initial	Additional	Email Address			
Fund Name						
Amount				Currency	PHP	USD
Amount in Words						
		PAYMEN	IT DETAILS / OPTIO	NS		
Cash Deposit		PEMI Bank Name	Date Deposited	Time Deposit	ted	Reference No.
Check Deposit <sup>1</sup>		PEMI Bank Name	Date Deposited	Time Deposit	ted	Reference No.
Fund Transfer <sup>2</sup>		Client Bank Name	Client Bank Account No.	Date of Trans	sfer	Reference No.
Check / Post Date	d Check (PDC) 1	Drawee Bank Name	Drawee Branch Name	Date of Chec	k	Check Number
<sup>1</sup> Subject to	receipt of good funds	and DAIF Fee	<sup>2</sup> Subject to validate	tion of payment deta	ils from Philequity's s	settlement bank

#### **DECLARATION OF INVESTORS**

I/ We hereby attest and acknowledge that:

- 1. All information disclosed is correct, complete and truly stated.
- 2. I/We am/are authorized to make this investment and that the amount invested in the Fund/s comes from legitimate sources.
- 3. I/ We hereby waive the results of our risk assessment and have decided to invest instead in another fund which has a risk level that is higher than what is recommended. I/We fully understand that I/we am/are taking more risk in exchange for possible higher returns. I/We expressly agree to assume such risks. I/We shall indemnify and hold harmless the members of PEMI, its directors, officers, and employees for any claim, suit action, loss, damage, or expenses which might such indemnified persons and/or I may incur as a result of my decision to invest in products with higher risks.
- 4. The transaction will only be processed upon submission of complete information and documentary requirements.
- 5. I/We have understood and have relied solely upon the General Terms and Conditions and the Fund's Prospectus.





SIGN PIC

Authorized Signatory 1
Signature over Printed Name

Authorized Signatory 2
Signature over Printed Name

Authorized Signatory 3
Signature over Printed Name

#### **IMPORTANT REMINDERS**

- Digital signatures are strictly prohibited and will cause your Investment Application Form or instruction to be rejected.
- ✓ Direct deposits to the wrong fund name will require a letter of instruction signed by all clients and a penalty fee which must be paid to PhilEquity Management, Inc.
- As proof of your investment, a Confirmation Notice will be sent to you not later than 7 business days with the number of shares/units purchased at the corresponding Net Asset Value Per Share (NAVPS) /Net Asset Value Per Unit (NAVPU).
- Documents received by 12 noon cut-off will be processed within the same business day using the NAVPS/NAVPU for the day. Anything received past cut-off shall be processed the next business day applying the corresponding NAVPS/NAVPU for that day. Cut-off times may vary depending on your distributor or agent.
- Investment Application Forms and validated proof of payment or deposits should be submitted to your distributor or agent for initial verification. If you are a PhilEquity direct client, documents may be:
  - Submitted to PhilEquity Management Inc. at 15<sup>th</sup> Floor, PSE Tower, 5<sup>th</sup> Ave. corner 28<sup>th</sup> St., Bonifacio Global City, Taguig City, 1634 ( PEMI will not pick up deliveries to the PSE Tower lobby)
  - ii. Emailed to invest@philequity.net (if enrolled to Electronic Mail Instructions).
- This document will be processed based on the date and time received by PhilEquity Management, Inc.

•				
		DISTRIBUTOR	/ AGENT ACKNOWLEDGEME	NT
Date / Time Received			Distributor / Branch	
Received By			Confirmed for processing by	
Sales Load	EX	DTSL	SSL:	
		PH	ILEQUITY USE ONLY	
Date / Time Received			Date Processed	
Source of Document			Processor	
Received By			Authorizer	



Provide your Philequity Account details

For Individual Account Sign once under Authorized Signatory 1

For Joint "OR" Account
At least 1 investor must sign

For Joint "AND" Account All investors must sign

The beneficiary does not sign

**For ITF Account** 

Choose One Option and fill out completely

Use the dropdown button to select a

mutual fund.

# **Investment Application Form**

### **WRITE LEGIBLY**

		treet, Bonifacio Global City, 1 ask@philequity.net 🛛 w				
(+032) 0250 0700 W III	vest@prillequity.net [	ask@priliequity.riet www	w.prillequity.riet			
INSTRUCTIONS: Please typ	e all information in C		is form completely. Write N/A on fi	ields that are not a	applicable and do n	ot leave any blank spaces.
	,	TRA	ANSACTION DETAILS			
Account Name						
Account Number			Contact Number			
Investment Type	Initial	Additional	Email Address			
Fund Name	Select One		+			
Amount				Currency	<b>○</b> PI	HP OUS
Amount in Words						
, and an evolution		PAYME	ENT DETAILS / OPTION	VS		
		PEMI Bank Name	Date Deposited	Time Depo	sited	Reference No.
Cash Deposit						
Check Deposit <sup>1</sup>		PEMI Bank Name	Date Deposited	Time Depo	sited	Reference No.
Crieck Deposit		Client Bank Name	Client Bank Account No.	Date of Tra		Reference No.
Fund Transfer <sup>2</sup>		Client Bank Name	Client Bank Account No.	Date of Tra	msier	Reference No.
		Drawee Bank Name	Drawee Branch Name	Date of Ch	eck	Check Number
Check / Post Date	ed Check (PDC) 1					
<sup>1</sup> Subject to	receipt of good funds	and DAIF Fee	<sup>2</sup> Subject to validation	on of payment det	tails from Philequity	's settlement bank
I/We am/are a     I/ We hereby than what is r agree to assu claim, suit act products with	authorized to make waive the results of ecommended. I/W me such risks. I/W ion, loss, damage higher risks.	of our risk assessment a le fully understand that I /e shall indemnify and h , or expenses which mig	at the amount invested in the ind have decided to invest in /we am/are taking more risk old harmless the members of jht such indemnified persons	nstead in anoth in exchange for of PEMI, its dir s and/or I may	ner fund which has or possible high ectors, officers, incur as a result	as a risk level that is h er returns. I/We expres and employees for an
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