

# ICEA LION UNIT TRUST FUNDS

## Application Form



**ICEA LION**  
ASSET MANAGEMENT  
Investment Security



A) PRIVATE INDIVIDUALS - COMPLETE THIS SECTION

Parents or guardians should sign in the case of a minor (under 18 years of age)

|                       | APPLICANT 1  | APPLICANT 2  |
|-----------------------|--|--|
| First Name            | <input type="text"/>   | <input type="text"/>   |
| Surname               | <input type="text"/>   | <input type="text"/>   |
| Date of Birth         | <div><div><input type="text" value="D"/><input type="text" value="D"/></div><div><input type="text" value="M"/><input type="text" value="M"/></div><div><input type="text" value="Y"/><input type="text" value="Y"/><input type="text" value="Y"/><input type="text" value="Y"/></div></div> | <div><div><input type="text" value="D"/><input type="text" value="D"/></div><div><input type="text" value="M"/><input type="text" value="M"/></div><div><input type="text" value="Y"/><input type="text" value="Y"/><input type="text" value="Y"/><input type="text" value="Y"/></div></div> |
| Gender                | <div><input type="text" value="M"/><input type="text" value="F"/></div>  | <div><input type="text" value="M"/><input type="text" value="F"/></div>  |
| Postal Address        | <input type="text"/>   | <input type="text"/>   |
| Street                | <input type="text"/>   | <input type="text"/>   |
| Estate                | <input type="text"/>   | <input type="text"/>   |
| House No.             | <input type="text"/>   | <input type="text"/>   |
| Nationality           | <input type="text"/>   | <input type="text"/>   |
| Marital Status        | <div><div><input type="text"/></div>Single<div><input type="text"/></div>Married<div><input type="text"/></div>Other</div>   | <div><div><input type="text"/></div>Single<div><input type="text"/></div>Married<div><input type="text"/></div>Other</div>   |
| Mobile Number         | <input type="text"/>   | <input type="text"/>   |
| Landline Number       | <input type="text"/>   | <input type="text"/>   |
| Email Address         | <input type="text"/>   | <input type="text"/>   |
| Passport/ID Number    | <input type="text"/>   | <input type="text"/>   |
| Passport Issue Date   | <input type="text"/>   | <input type="text"/>   |
| Passport Expiry Date  | <input type="text"/>   | <input type="text"/>   |
| Taxpayer Number (PIN) | <input type="text"/>   | <input type="text"/>   |



**B) INSTITUTIONS (COMPANIES, TRUSTS, CHARITIES, CLUBS, RELIGIOUS BODIES, SCHOOLS)  
COMPLETE THIS SECTION**

|                          |                      |                        |                      |
|--------------------------|----------------------|------------------------|----------------------|
| Name of Institution      | <input type="text"/> |                        |                      |
| Type of Institution      | <input type="text"/> |                        |                      |
| Registration No.         | <input type="text"/> | Registered Address     | <input type="text"/> |
| Company PIN No. or EIN   | <input type="text"/> |                        |                      |
| Contact's Phone No.      | <input type="text"/> |                        |                      |
| Physical Address         | <input type="text"/> |                        |                      |
| Organization's Phone No. | <input type="text"/> | Organization's Fax No. | <input type="text"/> |

**C) AUTHORIZED SIGNATORIES**

**Signatory 1**

|                      |   |   |   |                            |
|----------------------|---|---|---|----------------------------|
| Title                | <input type="text"/> Mr.                      | <input type="text"/> Ms.                      | <input type="text"/> Miss   | <input type="text"/> Other |
| Full Names           | <input type="text"/>                          |   |   |                            |
| Date of Birth        | <input type="text"/> D <input type="text"/> D | <input type="text"/> M <input type="text"/> M | <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y |                            |
| Gender               | <input type="text"/> M                        | <input type="text"/> F                        |   |                            |
| Postal Address       | <input type="text"/>                          |   |   |                            |
| Physical Address     | <input type="text"/>                          |   |   |                            |
| Nationality          | <input type="text"/>                          |   |   |                            |
| Marital Status       | <input type="text"/> Single                   | <input type="text"/> Married                  | <input type="text"/> Other  |                            |
| Phone No.            | <input type="text"/>                          |   |   |                            |
| Email Address        | <input type="text"/>                          |   |   |                            |
| Passport/ID No.      | <input type="text"/>                          |   |   |                            |
| Passport Expiry Date | <input type="text"/>                          |   |   |                            |
| Taxpayer No. (PIN)   | <input type="text"/>                          |   |   |                            |
| Specimen Signature   | <input type="text"/>                          |   |   |                            |

**Signatory 2**

|                      |   |   |   |                            |
|----------------------|---|---|---|----------------------------|
| Title                | <input type="text"/> Mr.                      | <input type="text"/> Ms.                      | <input type="text"/> Miss   | <input type="text"/> Other |
| Full Names           | <input type="text"/>                          |   |   |                            |
| Date of Birth        | <input type="text"/> D <input type="text"/> D | <input type="text"/> M <input type="text"/> M | <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y |                            |
| Gender               | <input type="text"/> M                        | <input type="text"/> F                        |   |                            |
| Postal Address       | <input type="text"/>                          |   |   |                            |
| Physical Address     | <input type="text"/>                          |   |   |                            |
| Nationality          | <input type="text"/>                          |   |   |                            |
| Marital Status       | <input type="text"/> Single                   | <input type="text"/> Married                  | <input type="text"/> Other  |                            |
| Phone No.            | <input type="text"/>                          |   |   |                            |
| Email Address        | <input type="text"/>                          |   |   |                            |
| Passport/ID No.      | <input type="text"/>                          |   |   |                            |
| Passport Expiry Date | <input type="text"/>                          |   |   |                            |
| Taxpayer No. (PIN)   | <input type="text"/>                          |   |   |                            |
| Specimen Signature   | <input type="text"/>                          |   |   |                            |



Signatory 3

Title

Mr.Mrs.Miss

Full Names

Date of BirthGender

M

F

Postal Address

Physical Address

Nationality

Marital Status

SingleMarriedOther

Phone No.

Email Address

Passport\ID No.

Passport Expiry Date

Taxpayer No.

Specimen Signature

Signatory 4

Title

Mr.Mrs.Miss

Full Names

Date of BirthGender

M

F

Postal Address

Physical Address

Nationality

Marital Status

SingleMarriedOther

Phone No.

Email Address

Passport\ID No.

Passport Expiry Date

Taxpayer No.

Specimen Signature

D) FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA)

1. Are you a U.S. Resident?

YesNo

2. Are you a U.S. Citizen?

YesNo

3. Are you holding a U.S. Permanent Resident Card (Green Card)?

YesNo

4. Were you born in the U.S?

YesNo

5. Have you granted power of attorney to a person with a U.S. address?

YesNo

6. Do you have a U.S. residential address?

YesNo

7. Do you have a correspondence, C/O or Hold mail address in the U.S?

YesNo

8. Do you have a standing order to a U.S. Bank Account?

YesNo

9. Do you have a U.S. telephone number?

YesNo



## E) RISK ASSESSMENT QUESTIONNAIRE

1. When you think of the word risk, what comes to your mind first?

Loss (1)    Uncertainty (2)    Opportunity (3)    Thrill (4)

2. Have you ever invested in financial markets before?

No (1)    Yes (2)

3. Approximately what portion of your total savings will this investment present?

Over 80% (1)    21 - 50% (2)    51 - 80% (3)    0 - 20% (4)

4. When making an investment, how long do you plan on holding it for?

0 - 1 years (1)    1 - 2 years (2)    3 - 5 years (3)    5 years (4)

5. Which one of the following most accurately describes your general attitude towards investing?

In order to minimise fluctuations in my investments, I am willing to accept lower returns in the long run (1)

I am willing to accept possible fluctuations in my investments in order to earn moderate returns over the long run (2)

I am willing to accept larger fluctuations in my investments in order to earn above average potential returns over the long run (3)

I am willing to accept large and potentially drastic fluctuations in my investments order to earn higher potential returns over the long run (4)

6. If the value of your investment went down by 20%, what would you do?

I would buy more of the investment (1)    I would sell some of the investment (2)

I would sell all of the investment (3)    I would hold on to the investment (4)

7. When do you plan to begin withdrawing money from the investment?

0 - 1 years (1)    1 - 2 years (2)    3 - 5 years (3)    5 years (4)

8. How would you describe your investment style?

Conservative (1)    Moderate (2)    Aggressive (3)

9. How do you feel about the following statement? Maintaining the principal of my investment account is more important than achieving significant growth

Strongly Agree (1)    Agree (2)    Somewhat Agree (3)    Disagree (4)

10. As an investor during an economic downturn, how do you react?

I would wait for things to start looking up, and then invest (1)

I would quickly sell off my existing investment (2)

I would immediately invest or add more money to my investment (3)

I would hold all of my investment (4)

*\*Kindly tally your scores and compare with the risk matrix below.*



| POINTS                | 5 - 15  | 16 - 25  | 26 - 35   |
|-----------------------|---|--|---|
| PROFILE               | Conservative  | Moderate   | Aggressive  |
| RISK CATEGORY DETAILS | Conservative investors are investors who want stability and are more concerned with protecting their current investments. A conservative investor is generally seeking to preserve capital and as a trade-off is usually prepared to accept lower investment returns. | Moderate investors are usually medium term investors who want to protect their capital and achieve some real increase. The investor is seeking a diversified portfolio with exposure to a broad range of investment sectors. | Aggressive investors are long term investors who want high capital growth. Substantial year to year fluctuations in value are acceptable in exchange for a potentially high long term return. An aggressive investor is comfortable accepting high volatility in their capital value, with the risk of short to medium term periods of negative returns. They are willing to trade higher risk for greater long term returns and typically will have a long investment objective. |

## F) FUND DETAILS

### Equity Fund

The fund is suitable for investors seeking long term capital growth. The fund aims to offer superior returns over the long term by maximizing the long term capital growth. The fund invests primarily in listed companies on the Nairobi Securities Exchange.

**Recommended investment horizon:** Long term (3-5 years)

**Risk level:** Medium - High Risk

#### Fee structure

- Initial fee - 0%
- Management fee - up to 2% per annum

I/We confirm that I/we have read and understood the above features and are ready to invest in the ICEA LION Equity Fund

**Investment Amount** .....

**Signature** .....

### DigiTrust Fund

The fund is suitable for investors seeking liquidity, regular interest and capital preservation. The fund invests primarily in interest bearing assets like fixed deposits and short term bonds.

**Recommended investment horizon:** Short - Medium term

**Risk level:** Low Risk

#### Fee structure

- Initial fee - 0%
- Management fee - up to 2% per annum

I/We confirm that I/we have read and understood the above features and are ready to invest in the ICEA LION Money Market Fund

**Investment Amount** .....

**Signature** .....

### Growth Fund

The fund is suitable for investors seeking a balanced portfolio. The fund invests primarily in listed companies on the Nairobi Securities Exchange as well as interest bearing assets like fixed deposits and bonds.

**Recommended investment horizon:** Medium - long term (3-5 years)

**Risk level:** Medium Risk

#### Fee structure

- Initial fee - 0%
- Management fee - up to 2% per annum

I/We confirm that I/we have read and understood the above features and are ready to invest in the ICEA LION Growth Fund

**Investment Amount** .....

**Signature** .....

### Bond Fund

The fund is suitable for investors seeking to invest in a diversified portfolio of bonds that offer regular income. It invests primarily in a diversified portfolio of treasury and corporate bonds.

**Recommended investment horizon:** Medium - long term (2-3 years)

**Risk level:** Medium - High Risk

#### Fee structure

- Initial fee - Up to 0%
- Management fee - up to 2% per annum

I/We confirm that I/we have read and understood the above features and are ready to invest in the ICEA LION Bond Fund

**Investment Amount** .....

**Signature** .....



### G) SOURCE OF FUNDS (to be completed by all applicants)

|                                 |                          |                        |                          |
|---------------------------------|--------------------------|------------------------|--------------------------|
| Salary/savings                  | <input type="checkbox"/> | Pension                | <input type="checkbox"/> |
| Rental/disposal property        | <input type="checkbox"/> | Loan                   | <input type="checkbox"/> |
| Sale of an investment portfolio | <input type="checkbox"/> | Betting/Lottery        | <input type="checkbox"/> |
| Donation/Gift/Inheritance       | <input type="checkbox"/> | Other (please specify) | <input type="checkbox"/> |
| .....                           |                          |                        |                          |
| .....                           |                          |                        |                          |
| Initial investment amount       | <input type="text"/>     |                        |                          |

### H) BANK ACCOUNT DETAILS OF APPLICANT(S)

**NOTE:**

1. If you opt to fill in your bank details, you will be required to attach proof in the form of a canceled check, atm card copy or bank statement."
2. We do not make 3<sup>rd</sup> party payments.

|                       |  |
|-----------------------|--|
| Bank Name             |  |
| Account Holder's Name |  |
| Branch Name           |  |
| Bank Code             |  |
| Account Number        |  |
| Account Type          |  |
| Bank Address          |  |
| Swift Code            |  |

### I) DEPOSIT OPTIONS

**1. Direct Debits**

You may authorize ICEA LION Asset Management to debit your bank account by completing a Direct Debit Instruction (DDI) form.

**2. Electronic Transfer / Telegraphic Transfer**

Payments can be made directly into the inflow accounts in which case the transfer confirmation 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 ICEA LION Asset Management Limited.

**3. Cheque**

ICEA LION Asset Management accepts personal, corporate and banker's cheques payable to the relevant unit trusts.

**4. M-Pesa**

Payments can be made via M-PESA Paybill No. 974200. For new accounts, enter the Account No. as 000000. All M-PESA payments have to be made from the investor's phone number.



## J) BANK ACCOUNT DETAILS OF TRUST

International payments: (Swift Code - SCBLKENXSSU)

| Fund                      | Account number | Bank                    | Branch          | Branch No. | Clearing Code |
|---------------------------|----------------|-------------------------|-----------------|------------|---------------|
| ICEA LION Equity Fund     | 0105016761100  | Standard Chartered Bank | CSC Head Office | 078        | 02            |
| ICEA LION Growth Fund     | 0105016761000  | Standard Chartered Bank | CSC Head Office | 078        | 02            |
| ICEA LION Bond Fund       | 0105016761300  | Standard Chartered Bank | CSC Head Office | 078        | 02            |
| ICEA LION Digi Trust Fund | 0105016760900  | Standard Chartered Bank | CSC Head Office | 078        | 02            |
| ICEA LION Unit Trusts     | 0105016761200  | Standard Chartered Bank | CSC Head Office | 078        | 02            |

*\*For tax exempt clients, please provide a copy of a current tax exemption certificate.*

## K) BENEFICIARIES

The Client instructs that in the event of death prior to termination of this agreement or death after the termination of the agreement but ILAM has not transferred all funds and securities to the client, any funds and securities held by ILAM shall be held in Trust to be paid to the beneficiaries listed below:

|                        | Beneficiary 1 | Beneficiary 2 |
|------------------------|---------------|---------------|
| Full Name              |               |               |
| ID Number              |               |               |
| Physical Address       |               |               |
| Postal Address         |               |               |
| Telephone Number       |               |               |
| Relationship (if any)  |               |               |
| Proportion of benefits |               |               |

|                        | Beneficiary 3 | Beneficiary 4 |
|------------------------|---------------|---------------|
| Full Name              |               |               |
| ID Number              |               |               |
| Physical Address       |               |               |
| Postal Address         |               |               |
| Telephone Number       |               |               |
| Relationship (if any)  |               |               |
| Proportion of benefits |               |               |

*\*If minor, please provide a copy of the minor's birth certificate or baptism card (in the absence of a birth certificate)*

## L) TERMS & CONDITIONS

For Terms and Conditions kindly refer to our website [www.icealion.com](http://www.icealion.com)



## M) PREFERRED MODE OF CONTACT

Please tick how you would like to receive communication such as statements, updates, etc.

☐

E-mail

☐

Text message

☐

Post (attracts a postage fee)

## N) (a) SIGNING ARRANGEMENT / ACCOUNT MANDATE (INDIVIDUAL)

All instructions to ICEA LION Asset Management regarding this account must be given by:

☐

The Applicant only

☐

Both Applicants (incase of joint account)

☐

All Applicants (incase of multiple account)

Special signing arrangement (please specify) \_\_\_\_\_

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

Applicant 1 (Name)

Signature

Date

Applicant 2 (Name)

Signature

Date



## N) (b) SIGNING ARRANGEMENT / ACCOUNT MANDATE (CORPORATE)

All instructions to ICEA LION Asset Management regarding this account must be given by:

☐ Any one authorised person      ☐ Any two authorised persons      ☐ All authorised persons

Special signing arrangement (please specify) \_\_\_\_\_

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

Director 1

Signature  Date

Director 2

Signature  Date

Director 3

Signature  Date

Director 4

Signature  Date

## O) DOCUMENTS TO BE ATTACHED

- ☐ Copy of ID/Passport
- ☐ Copy of Bank Statement (suitable alternative) to verify Bank Details
- ☐ Proof of Payment
- ☐ PIN Certificate
- ☐ Utility Bill / Tenancy Agreement / Physical Address Form
- ☐ Copy of Certificate of Registration and Copy of ID for Authorized Signatories (Corporate Application)
- ☐ Income tax exemption certificate where applicable (Corporate Application)

AML Risk Category \_\_\_\_\_ Review Date \_\_\_\_\_ PEP Status \_\_\_\_\_

FATCA Status:

☐ Yes      ☐ No

If Yes, FATCA documentation to be completed

- ☐ Form W9 (U.S Persons only)      ☐ Form W-8BEN (Non U.S Persons only)
- ☐ ID/Passport      ☐ Written explanation for US born non-US citizens (Confirmation of renunciation of U.S citizenship/reason for not taking U.S citizenship at birth)



**P) FOR OFFICIAL USE ONLY**

*Introducing Agent; I confirm that all the above documents have been attached*

Agent's Name and Branch \_\_\_\_\_

Agent's Code No. \_\_\_\_\_

Agent's Signature \_\_\_\_\_

Unit Leader's Name \_\_\_\_\_

**Q) ACCOUNT OPENING OFFICER**

Received by \_\_\_\_\_ Created by \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

Stamp \_\_\_\_\_

Confirmed by \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_



## APPENDIX 1: RESIDENTIAL ADDRESS FORM



NB: This form should be filled where a Utility Bill i.e. Water, Telephone and Electricity, is not available

**TO: ICEA LION ASSET MANAGEMENT  
HEAD OFFICE  
P.O. BOX 46143 - 00100  
NAIROBI, KENYA**

Dear Sir/Madam,

I hereby declare that the facts below are accurate descriptions of my residential address. I further confirm that this FORM has been provided as I do not have any utility bill in my name that may be used to verify my current residential address.

Applicant's Full Name: \_\_\_\_\_

Land Registration (L.R.) Number: \_\_\_\_\_

Estate: \_\_\_\_\_

House number: \_\_\_\_\_

Road: \_\_\_\_\_

Town/Area: \_\_\_\_\_

Applicants signature: \_\_\_\_\_

Date: \_\_\_\_\_

### WITNESSED BY:

TLA/UNIT LEADER/AGENT/BROKER Name: \_\_\_\_\_

TLA/UNIT LEADER/AGENT/BROKER Signature: \_\_\_\_\_

Signed on: 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|



