



MARBLE HALAL MUTUAL FUND

MARBLE HALAL COMMODITIES FUND MARBLE HALAL FIXED INCOME FUND
CATEGORY OF BUSINESS
Limited Liability Company Partnership Enterprises Others: please specify
PLEASE COMPLETE IN BLOCK LETTERS AND IN BLACK INK
1. COMPANY INFORMATION
Company Name:
Registration Number:
Date of Incorporation:
Type/Nature of Business:
Industry:
Company Address:
Mailing Address:
Country:
Email Address:
Telephone: Website:
Purpose of Investment:
Source of Investment Fund:
Tax Identification Number(TIN):
Average Annual Turnover(NGN):
Less than 50m 50m - Less than 500m 500m - Less than 5B Above 5B
2A. ACCOUNT SIGNATORY'S DETAILS
Title: Mr Mrs Ms Others, Please specify
Surname:
First Name:
Other Name(s):
Date of Birth:
Mother's Maiden Name: Gender: M F
E-mail:
State of Origin: LGA:
Nationality: Marital Status: Single Married Divorced
Residential Address:
City: State:
Telephone: Mobile: Mobile:
Means of ID: International Passport Driver's License NIMC Voter's Card ID Number: Issue Date:
Expiry Date: DD / MM / YYYY Tax Identification Number:

Occupation: Status/Title:
Nationality: Resident Permit No:
(Non-Nigerian) Permit Issue Date: DD / MM / YYYY Permit Expiry Date: DD / MM / YYYYY
BVN:
Class of Signatory: A B C
(Please indicate class in the box)
Signature: Date: DD / MM / YYYY
2B. ACCOUNT SIGNATORY'S DETAILS
Title: Mr Mrs Ms Others, Please specify
Surname:
First Name:
Other Name(s):
Date of Birth: DD / MM / YYYY
Mother's Maiden Name: Gender: M F
E-mail:
State of Origin: LGA:
Nationality: Married Divorced Divorced
Residential Address:
City: State:
Telephone: Mobile:
Means of ID: International Passport Driver's License NIMC Voter's Card
ID Number: Issue Date:
Expiry Date: DD / MM / YYYY Tax Identification Number:
Occupation: Status/Title:
Nationality: Resident Permit No:
(Non-Nigerian) Permit Issue Date: DD / MM / YYYY Permit Expiry Date: DD / MM / YYYYY
BVN:
Class of Signatory:
(Please indicate class in the box) A B C
Signature: Date: Date: Date:
3A. DETAILS OF THE DIRECTORS/ EXECUTIVES/ PRINCIPAL OFFICER
Title: Mr Mrs Ms Others, Please specify
Surname:
First Name:
Other Name(s):
Date of Birth:
Mother's Maiden Name: Gender: M F
E-mail:
State of Origin: LGA:
Nationality: Marital Status: Single Married Divorced
Residential Address:

City: State:
Telephone: Mobile:
Means of ID: International Passport Driver's License NIMC Voter's Card
ID Number: Issue Date: DD / MM / YYYY
Expiry Date: DD / MM / Y Y Y Y TIN:
Occupation: Status/Title:
Nationality: Resident Permit No:
(Non-Nigerián) Permit Issue Date: DD / MM / YYYY Permit Expiry Date: DD / MM / YYYYY
BVN:
3B. DETAILS OF THE DIRECTORS/ EXECUTIVES/ PRINCIPAL OFFICER
Title: Mr Mrs Ms Others, Please specify
Surname:
First Name:
Other Name(s):
Date of Birth: DD / MM / YYYY
Mother's Maiden Name: Gender: M F
E-mail:
State of Origin: LGA:
Nationality: Married Divorced Divorced
Residential Address:
City: State:
Telephone: Mobile:
Means of ID: International Passport Driver's License NIMC Voter's Card
ID Number: Sue Date: DD / MM / YYYY
Expiry Date: DD / MM / YYYY Tax Identification Number
Occupation: Status/Title:
Nationality: Resident Permit No: (Non-Nigerian)
Permit Issue Date: DD / MM / YYYY Permit Expiry Date: DD / MM / YYYYY
BVN:
4. BANK DETAILS
Account Name:
Bank Name:
Account Number:
You are responsible for the accuracy of the bank account details provided and MCL will not be liable for any loss that may arise due to the inaccuracy of the bank account details provided by you.
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5. INVESTMENT DETAILS MARBLE HALAL COMMODITIES FUND Amount to be invested(NGN): Reinvested in the fund

MARBLE HALAL FIXED INCOME FUND	RETURNS PAYMENT		
Amount to be invested (NGN):	Reinvested in the fund		
	Pay to the bank account provided		
100 Units Minimum Subsequent multiples of 100 units	How would you like to receive investment notifications? SMS Email		
6. AUTHENTICATION FOR POLITICALLY EXPOSED PERSON Have any signatory or any affiliate/relatives occupied any Political Position? Yes No			
7. HOW DID YOU HEAR ABOUT US??			
Marble Capital Limited Branch Online Website	Social Media Email/SMS		
Direct Marketing Networking/Referral (Others {Please Specify) ——————		

8. DATA PRIVACY CONSENT

Personal Information: Information about an identifiable, natural person and where applicable, a juristic person, including, but not limited to information about: race, gender, sex, pregnancy, marital status, nationality, ethnic or social origin, colour, sexual orientation, age, physical or mental health, well-being, disability, religion, conscience, belief, culture, language, birth, education, medical, financial, criminal or employment history, any identifying number, symbol, e-mail, postal or physical address, telephone number, location, any online identifier, any other particular assignment of the person, biometric information, personal opinions, views or preferences of the person or the views or opinions of another individual about the person, correspondence sent by the person that is implicitly or explicitly of a private or confidential nature or further correspondence that would reveal the contents of the original correspondence, and the name of the person if it appears with other personal information relating to the person or if the disclosure of the name itself would reveal information about the person.

Process: Any operation or activity, automated or not, concerning personal information, including: alteration, blocking, collation, collection, consultation, degradation, destruction, dissemination by means of transmission, distribution or making available in any other form, erasure, linking, merging, organization, receipt, recording, retrieval, storage, updating, modification, or the use of information. Processing and Processed will have a similar meaning.

Data protection

- 1. You consent to us collecting your personal information from you and where lawful and reasonable, from public sources for credit, fraud and compliance purposes, as well as the purposes set out below.
- 2. If you give us Personal Information about or on behalf of another person (including, but not limited to, account signatories, shareholders, principal executive officers, trustees and beneficiaries), you confirm that you are authorized to: (a) give us the Personal Information;
- (b) consent on their behalf to the Processing of their personal information, specifically any cross-border transfer of Personal Information into and outside the country where the products or services are provided; and
- (c) receive any privacy notices on their behalf.
- 3. You consent to us Processing your personal information:
- to provide products and services to you in terms of this agreement and any other products and services for which you may apply;
- to carry out statistical and other analyses to identify potential markets and trends, evaluate and improve our business (this includes improving existing and developing new products and services);
- In countries outside the country where the products or services are provided. These countries may not have the same data protection laws as the country where the products or services are provided. Where we can, we will ask the receiving party to agree to our privacy policies;
- By sharing your personal information with our third-party service providers, locally and outside the country where the products or services are provided. We ask people who provide services to us to agree to our privacy policies if they need access to any personal information to carry out their services; and within Marble Capital Limited.
- 4. You will find our Processing practices in our privacy statements. These statements are available on the Marble's website or on request.
- 5. If you are unsure about your tax or legal position because your personal information is processed in countries other than where you live, you should get independent advice.

IMPORTANT

- 1. Please note that the units of the funds will be purchased at the prevailing offer price on the day the evidence of the funds transfer and subscription form are received.
- 2. Please read the prospectus and consult you stockbroker, fund/portfolio manager, accountant, banker, solicitor, or any other professional adviser for guidance before subscribing.
- 3. Note that fund price is subject to market performance.
- 4. Past performance does not guarantee future performance.

9. DECLARAT	10	N
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I/We am/are 18years of age or above.			
I/We attach the evidence of payment for the stated investment amount for units in the specified MARBLE HALAL MUTUAL FUNDS.			
I/We agree to accept the number of units allotted based o	n the terms of the appropriate Prospectus.		
I/We understand that we will receive our allotted units in e	ither Certificate or E-certificate form.		
	or any amount overpaid or rejected, by registered post at my/		
our risk to the address given above.	Tany amount overpaid of rejected, by registered post at my,		
I/We hereby declare that I/We have read the applicable Of	fer Prospectus issued by the Fund Manager		
if we hereby decide that if we have read the applicable of	ter i rospectus issued by the runa Manager.		
10. SIGNATURE(S):			
CORPORATE UNIT HOLDER'S SIGNATURE	CORPORATE UNIT HOLDER'S 2ND SIGNATURE		
CONTROL CHAT THEE ENG CHATATORE	OOM OWNE OWN HOLDENG 2 GIOWATOKE		
NIAME.	NAME.		
NAME:	NAME:		
DESIGNATION:	DESIGNATION:		
COMPANY SEAL / STAMP AND DATE			
I and the second			

Please ensure two authorised signatories execute and state their designation

PAYMENT ACCOUNT INFORMATION

Payment should be made into the account detailed below		
Name of Funds	Marble Halal Commodities Fund	
Bank Name:	FSDH Merchant Bank	
Account Name:	Stanbic IBTC Trustees Limited/ Marble Halal Commodities Fund	
Account Number:	1000139697	
Narration:	Name of Investor	

Payment should be made into the account detailed below		
Name of Funds	Marble Halal Fixed Income Fund	
Bank Name:	FSDH Merchant Bank	
Account Name:	Stanbic IBTC Trustees Limited/ Marble Halal Fixed Income Fund	
Account Number:	1000139680	
Narration:	Name of Investor	

This completed form should be sent with payment/evidence of remittance to:

The Fund Manager,

MARBLE CAPITAL LIMITED.

Email: mutualfunds@marble.capital M: $+234\ 909\ 111\ 1938$, $+234\ 80\ 99\ MARBLE$ Western House, 8th Floor, 8-10 Broad Street, Lagos Island, Lagos, Nigeria.



FOR FUND MANAGER'S USE

Documents Required	Checked	Deferred	Waived
Completed Application Form (all relevant fields must be completed)			
Proof of company's address			
Clear passport-size photographs of each signatory, with names written on the reverse side			
Specimen Signature Card (where required)			
Board Resolution			
Return of Allotment of Shares Form CAC2 (LLC)			
Copy of CAC Certificate of Registration			
Copy of Memorandum and Articles of Association (certified as True copy by the Reegistar of Companies)			
Evidence of Registration with Special Control Unit on Money Laundering (SCUML) (where applicable)			
Corporate Search Report			
Particulars of Directors Form CAC7 (LLC)			
Resident Permit or Work Permit (for non-Nigerians)			
Proof of Identity of all Signatories and Directors/Officers whose name appear on the account opening form/document (Preferred Identity card are Int'l Passport, National Identity Card, National Driver's License, and Valid Nigerian INEC Voter's Card)			
Proof of Address of all Signatories and Directors/Officers whose name appear on the account opening form/document Utility bill(Certified true copy is acceptable if original is not held)			