

	Date -			_		
		(DD	-	MM	-	YY)
ABL AMC A/C No.						
	For Office Use Only					

KNOW YOUR CUSTOMER (KYC) - INDIVIDUAL

Applicant Status	Principal Account Holder Joint Account Holder						
Name CNIC							
Please provide the following information as required by Anti Money Laundering & Counter Terrorist Financing Regulations 2020							
Residential Status	Resident Pakistani Non Resident Pakistani In case of US Foreign National						
Only for Foreign Nationals	Nationality r Foreign Nationals						
	Do you belong to countries where KYC/AML regulations are negligent Yes No						
Source of Fund (Please attach supporting documents, Multiple options can be selected)	Salary/Wages Commission Income Home Remittance Business/ Self Employed (Please Specify) Inheritance Agriculture Income Investment Other (Please Specify)						
	Name and Address of Employer in case of Salaried class:						
Annual Income (PKR)	Up to 1 Million Up to 2 Million Up to 4 Million Up to 6 Million Up to 8 Million Up to 10 Million Over 10 Million						
Expected Investment Amount (PKR)	Up to 1 Million Up to 2 Million Up to 4 Million Up to 6 Million Up to 8 Million Up to 10 Million Over 10 Million						
Expected Investment per Transactions (rupees)	Expected No. of sale Transactions/ per month						
Nature of Business (Applicable for Self-Employed)	Geographies Involved Domestic Ex-FATA International						
Declaration by Investor (Please mark the box if the declaration is correct)	My account has never been refused by any financial institution This account is not being opened on behalf of any other person						
	I am not holding a senior position in any public office I am not holding a senior position in any political party/PEP*						
	I do not deal in precious metal & Stones. (Gold, Silver, Diamond etc) I do not have any links to offshore tax haven countries						
	I am not a close associate or family member of a PEP Beneficial owner (if any) is not a PEP or a close associate or family member of a PEP						
Includes Senior Politicians, Govt. Officials, Judicial or Military Officials, Executive of SOE/ Autonomous body equivalent to Grade 21 or above.							
Declaration We undersigned, hereby declare that the above mentioned information is correct, complete and up-to-date to the best of my knowledge and belief, and I/ we shall immediately update ABL AMCL if there is any change in such information. I hereby assure to ABL AMCL that the proceeds invested in the Fund(s) are not derived from money laundering or illegal activies and the source of funds declared in this Form is true and correct to the best of my knowledge and belief.							
Risk Category: High	Medium Low						
To be filled by the concerned sales representative under the given guideline in applicable laws related to KYC & AML/CFT Regulation 2020.							