



APPLICATION FOR PARTICIPATION IN AL MABROOR SHARIAH PROPERTY INVESTMENT - JURISTIC PERSON

INVESTOR DETAILS

CHOOSE ONE: Trust Company CC Other (Please specify)

Name of Entity:

Registration Number:

Physical Address:

Postal Code:

Email Address: Mobile Number:

Business Activities: Industries:

PERSON ACTING ON BEHALF OF THE ABOVE ENTITY:

Name and Surname

ID Number: Mr Mrs Ms

BANK DETAILS

Name of Bank: Account Number:

Account Holder: Branch Code:

INVESTMENT PREFERENCE: (Please specify)

Hospital Fund: Hospicare: Saratoga:

INVESTMENT AMOUNT

Total Investment Amount:

Source of Funds: (Please specify)

TO: THE MANAGEMENT AGENT AL MABROOR PROJECTS

1. I unconditionally and irrevocably apply to become a partner in one or more Shariah Compliant Property Partnerships ("the partnership"), to be formed on the terms and conditions of the partnership agreement establishing the partnership ("the partnership agreement").
2. I understand that you, as the Management Agent may, in your sole and absolute discretion, accept or reject this application. I irrevocably and unconditionally commit the amount recorded in Schedule A as my initial committed capital to the partnerships
3. I hereby confirm that the Partnership Agreement referred to above in paragraph 1 was made available to me on the Management Agent's website.
4. I have read and understood the contents of this Partnership Agreement and agree to be bound by its terms.
5. I hereby declare that the information contained in Page 1 of this application form is true and correct.
6. I hereby declare that I have provided all the necessary documentation required by the Management Agent in terms of FICA as contained in Page 3 of this application form.
7. I hereby permit the Management Agent to conduct any investigation to verify that the information and documentation included in this application are correct.
8. Where this application is signed in a representative capacity, I declare that I have the necessary authority to do so and that this transaction is within my power duly granted by my principal.
9. I warrant that in respect of this investment I have not contravened any money laundering legislation and regulations applicable to me.
10. I have read and understood the contents of this application form and agree to be bound by the terms and conditions contained herein.
11. I hereby acknowledge that I have acquainted myself with and accepted the fees and expenses that are to be charged to my investment from time to time. I agree to be charged the management fee as set out in the partnership agreement.
12. I understand that it is my responsibility to familiarize myself and accept the risk associated with this investment.
13. If the total number of partners in any one partnership ever exceeds 20, this application form shall be deemed to be my application form to participate in any other en-commandite partnership which you may establish having the same structure and partnership agreement which does not differ materially from the partnership agreement, and you will notify me of the partnership of which we are a member.
14. I accept and confirm that my application to become a partner in the partnership is made solely and only on the basis of the partnership agreement. My application is not made in reliance on any other information, representations or warranties, whether express or implied, whether oral or written, whatsoever. I understand and confirm that I have evaluated the risks connected with becoming a partner in the partnership.
15. I pledge to keep all information and documentation provided in the process of this application confidential, and not to disclose any such information except as provided for in the Partnership Agreement.
16. This application, with its terms and conditions, shall be governed by and construed according to the laws of the Republic of South Africa and I irrevocably consent to the exclusive jurisdiction of the Durban and Coastal Division of the High Court of South Africa.
17. I choose the physical address recorded in Schedule A for the purpose of any notice to be served on me pursuant to the partnership agreement, and this address shall be my chosen domicilium citandi et executandi. I am entitled to change our domicilium by notice in writing, provided that the new domicilium is a physical address within the Republic of South Africa at which process can be served.
18. I, the undersigned, hereby instruct Gerber Attorneys & Conveyancers to pay any funds, held in the trust on my behalf, to any account nominated by Al Mabroor Projects, upon demand to do so.

BROKER DETAILS

Name of Broker:

Brokerage:

PAYMENT DETAILS

Gerber Attorneys Trust Account,

ABSA Bank Paarl (632005)

Account Number: 407 667 6265

Reference: AM/SURNAME

Name of Signatory:

Dated:

CLIENT SIGNATURE

BROKER SIGNATURE

FICA DOCUMENTS TO BE SUBMITTED WITH THE APPLICATION FORM

COMPANY

- Board resolution / Affidavit / Letter of authority to authorize signatory
- Copy of ID's of Directors and Authorised persons
- Certificate of Incorporation
- Proof of Physical Address of Company
- Proof of SA Bank Details of Company
- Resolution confirming Shareholding
- Copy of ID/Reg Documents for ALL natural / legal persons holding 25% or more interest in the business
- Proof of Address for ALL natural / legal persons holding 25% or more interest in the business
- Source of Funds

CLOSED COOPERATION

- Founding statement
- Amended Founding Statement if Applicable
- Certificate of Incorporation
- Proof of SA bank Details of Closed Corporation
- Proof of Physical Address of Closed Corporation
- Resolutions / Letter of authority authorising signatory
- Proof of ID of each Member and Authorised person
- Proof of physical address each Member and Authorised person
- Proof of ID/Registration Document for ALL natural / legal persons holding 25% or more interest in the business
- Proof of Address for ALL natural / legal persons holding 25% or more interest in the business
- Source of Funds

TRUST

- Letter of Authority from the Master of High Court
- Proof of SA Bank details in name of Trust
- Proof of address of the Trust
- Resolution authorizing trustee to act
- Copy of ID's of all Trustees and Trust Founder
- Proof of address of all Trustees and Trust Founder
- Copy of ID's of all NAMED beneficiaries
- Proof of address of all NAMED beneficiaries
- Death certificate where Trustee / Founder is deceased
- Source of Funds

OTHER (PARTNERSHIP/CLUB/ASSOCIATION/ BODY CORPORATE/INCORPORATED ENTITY, ETC)

- Constitution or other founding document
- Resolution / Letter of Authority authorizing signatory
- Copy of ID of all representatives
- Proof of Physical address of al representatives
- Proof of SA bank details of partnership/ club / association / body corporate
- Source of Funds

PERSONAL NEEDS ANALYSIS AND RECORD OF ADVICE (ROA)

IMPORTANT: This document sets out the process followed by the broker to understand your investment need and to recommend a suitable Shariah Investment Product. It is important that you provide all information requested and answer any questions accurately so that appropriate recommendations can be made that meets your specific needs. If you are unsure of any information or need any clarification please ask your broker for assistance. Ensure that all blocks are ticked and that your answers are correctly reflected.

FINANCIAL NEED/GOAL PRIORITISED:

FINANCIAL PRODUCTS RECOMMENDED AND REASON:

RATIONALE FOR PRODUCT(S) SELECTED:

ADDITIONAL NOTES

Are there any additional notes? Yes No (if yes, please attach annexure)

DECLARATION

I, (client), hereby confirm that this form was fully completed prior to me signing it and that the information provided by myself are true and correct.

Signed at: _____ on this _____ day of _____ 20 _____

Client Signature:

Broker Signature: