



NATIONAL INVESTMENT TRUST LIMITED

SR. No. _____

REDEMPTION FORM

NIT-D

I/We request NIT to redeem Units as detailed below:

Branch: _____

DATE (DD / MM / YY): [][]/[][]/[][][][]

UNIT HOLDER'S INFORMATION :

Title of Account: _____

REDEMPTION DETAILS: Tick (√) whichever is applicable. [In case, redemption of units is from different account(s), please fill in separate form for each account]

Selection of Fund - Please select appropriate Fund.

EQUITY SCHEME INCOME SCHEMES MONEY MARKET SCHEME SHARIAH COMPLIANT EQUITY SCHEME SHARIAH COMPLIANT INCOME SCHEME ASSET ALLOCATION SCHEME
[] NI(U)T FUND [] NIT-GBF [] NIT-MMF* [] NIT-IEF [] NIT-IIF [] NIT-AAF

Table with 4 columns: Account Number, No. of Physical Units, No. of Electronic Units, Total Number of Units OR Redemption Amount (Rs.)

Physical Unit Certificates Nos. (Please also attach physical unit certificates with this form)

(and / or as per list attached)

[] Direct Transfer of proceeds to my/our bank account mentioned below: (Subject to applicable banks only; all fields mandatory)

Bank Name: _____ Branch Name: _____

Complete A/c. No.: _____

Branch Address: _____ City: _____

- 1. I/We confirm having filled and signed this application form after having read and understood all the reference notes and the provisions of the Trust Deed(s)/Offering Document(s).
2. I/We ratify that the information provided in this form is correct.

Table with 3 columns: Details of Unit Holder, Signature as per NIT Record, Verification (For Official Use Only). Rows for Principal and Joint Unit Holders.

Company Name: _____ (For Institution only) NTN: _____ Stamp (For Institution only)

FOR OFFICIAL USE ONLY

DATE (DD / MM / YY): [][]/[][]/[][][][] TIME: _____ : _____ AM / PM Repurchase No.: _____

Table with 5 columns: No. of Units Redeemed, Price per unit, Gross Amount (Rs.), DEDUCTIONS (Capital Gain Tax, Zakat), Net Amount (Rs.)

Account Operating Instructions (as per branch record):

- 1. [] Principal 2. [] Jointly (any two) 3. [] Jointly (All) 4. [] Any One

Form reviewed and checked by: _____

Branch Name, Stamp & Signature of Branch Manager / Authorized Official: _____