SECTION-XVII					ļ	\PP	LIC/		ON	FOF	RMS		
"Interested persons are entitled to a prospectus,	শেয়ার বাজারে বিনিয়োগ ঝুকিপূর্ণ। জেনে ও বুঝে বিনিয়োগ করুন। terested persons are entitled to a prospectus, if they so desire. Copies of prospectus may be obtained from the issuer and the issue manager" IFAD Autos Limited APPLICATION FORM												
APPLICATION FO Warning: Please read the instructions on the	e back of this form. In	correctly	filled	Applic	cations or					comply	y with ar	<u>ny of</u>	
The Managing Director IFAD Autos Limited Sonar Tori Tower (15th & 16th Floor) 12, Bipanan C/A, Sonargaon Road Dhaka-1000	the instructions therein may be rejected.						Bankers Sl. No.						
Dear Sir, I/we apply for and request you to allot smaller number that may be allotted to Exchange Commission subject to the M to place my/our name(s) on the Reg Beneficiary Owner ("BO") account; I/w any Application money refundable to m 1. No. of Ordinary Shares	to me/us upon term Iemorandum and Au ister of Member(s) we further authorize ne/us by post/courie	ns of the rticles of) of the you to s r at my/o	Con Asso Com and a our ris	npany ciatio pany cross k to tl	's Prosp on of the and dep sed (Acc he first a	ectus Composit count pplic	appropany. the s Payee ant's a	oved Furth aid c e only addre	by ther, I/ brdina () che ss sta	he Sea /we au ary sh eque i ated be	curities athorize ares in n respected elow:	and you my	
2. Amountof Tk. (in figures) cash/Cheque/Draft/Pay Order No	Taka (i Date	n words)						on	ly dep	posited	vide 	
Bank 3. Beneficiary Owner (BO) A/C No.	Branch	ı.											
5. Particulars of Applicant a) Sole/First Applicant Name: Father's/Husband's Name: Mother's Name: Postal Address:													
Phone Number* (If any): Occupation:		Nationa	1: +										
For Refund Warrant: For Refund Warr this complication, investors are requeste bank and branch. For Refund Purpose: I/We want refund	ed not to use the nam	l not be t le of any	reated	chedu	le bank)	please	e write	e the	correc	ct and	full nan	ne of	
will be made) Applicants Bank A/c no. Name of the Bank:]	Branc	h :									
b) Second Applicant Name:													
Father's/Husband's Name: Mother's Name:													
Postal Address:		1											
Phone Number* (If any): Occupation:		Nationa	litv:										
6. I/we hereby declare that I/we have No.of Ordinary Shares of Tk		tus of II	FAD							ly sut	oscribed	l for	
7. Specimen Signature(s):(i) Name (in Block Letters)					Signat	ure:							
(ii) Name (in Block Letters)					Signat								
* In case of deposit into the applicants' band and the issuer shall simultaneously issue a le details of the bank through and to which ban	etter of intimation to t	he applica been effe	ant co cted.	ntainir	ng, among								
Certified that this Bank has received /Mrs./Ms.	being the Applic							of IF	AD A	utos L	limited		
Banker's SL. No. Seal	& Date							A	ıthori	ized Si	ignature		

(Name & Designation)