Bank AL Habib Limited





SECURITIES WITHDRAWAL FORM

ISSUER'S / R/TA'S COPY

	DAT	Day Month	Year	FORM NO.
GEM Linked Account Number:	-	-		
Name of Title Account Holder:				
3. Security Name:				
4. VOLUME OF SECURITIES TO BE WITHDRAWL:				
a. IN FIGURES	b. IN WORDS			
5 NO. OF CERTIFICATE(S) TO BE	E ISSUED IN LOT(S) OF		SHARES / UNITS IN	EACH CERTIFICATE
SIGNATURE OF AUTHORIZED SIGNATORY(IES)				
SHAREHOLDER'S DETAIL				
1. NAME OF TITLE HOLDER				
2. FATHER'S / HUSBAND'S NAME				
3. ADDRESS				
4. RESIDENTIAL STATUS (mark tick[\checkmark] in appropriate	box)			
FOR INDIVIDUAL	RESIDENT PAKISTANI	NON-RESIDENT	PAKISTANI _	FOREIGN NATIONAL
FOR COMPANY OR OTHER BODY CORPORATE	RESIDENT ENTITY	NON-RESIDENT	/ FOREIGN ENTITY	
1011 00111 ANT 011 0111211 2021 0011 011ATE		NON HEOREEN	, ronzian zmiri	
5. CNIC/NICOP/PASSPORT NO. (IN CASE OF INDIVIDUAL) UIN (IN CASE OF COMPANY OR OTHER BODY CORPORATE				
6. ZAKAT STATUS:				
MUSLIM-ZAKAT PAYABLE MUSLI	M-ZAKAT NON-PAYABLE	NON MUSLIM	NOT APPLICA	BLE
7. DIVIDEND MANDATE YES NO				
(fill the following if dividend mandate is ticked yes)				
a. BANK ACCOUNT TITLE				
b. BANK NAME & BRANCH				
c. BANK ACCOUNT NO	d. ADDRES	ss		

8. DETAIL OF JOINT HOLDER(S) (if applicable)																	
a. NAME	CN	IIC/NICOP	/PASSPOR	RT NO.													
FATHER'S/HUSBAND'S NAME					•	•		•	•	•	•		•	•			
b. NAME	CN	IIC/NICOP	/PASSPOF	RT NO.													
FATHER'S/HUSBAND'S NAME																	
	CN	IIC/NICOP	/PASSPOR	RT NO.													
FATHER'S/HUSBAND'S NAME																	
9. NOMINEE DETAILS											_						
a. NAME	b. CN	IC/NICOP	/PASSPOR	RT NO.													
c. FATHER'S/HUSBAND'S NAME																	
d. RELATION (should be either spouse, father, mother, brother	r, sister and son or daughter, including a	T															
10. OCCUPATION (FOR INDIVIDUAL) (kindly mark tick [/] in appropriate box)			GORY (FOR	in appropria		ОТНЕ	R BO	DY C									
AGRICULTURIST PROFESSIONAL HOUSE WIFE BUSINESS EXECUTIVE SERVICE OTHER (SPECIFY)	HOUSEHOLD STUDENT BUSINESS RETIRED PERSON INDUSTRIALIST	MUTUAL FUND JOINT STOCK COMPANY MODARABA MGMT CO. COOPERATIVE SOCIETY INVESTMENT COMPANY FINANCIAL INSTITUTION INSURANCE COMPANY TRUST/CHARITABLE TRUST LEASING COMPANY OTHER (SPECIFY)															
NAME OF TITLE HOLDER				SIGNATU	JRE &	STAI	MP*										
IN CASE OF JOINT HOLDER(S) (if applicable)				*(IN CASI	E OF C	OMPA	NY O	R OT	HER B	ODY	COR	PORA	TE)				
1 NAME				SIGNATURE													
2 NAME				SIGNATURE													
3 NAME				SIGNATURE													
FOR ISSUER / R/TA RECOR																	
NAME OF TITLE HOLDER			:	SIGNATI	JRE												
IN CASE OF JOINT HOLDER(S) (if applicable)																	
1 NAME				SIGNATI	JRE												
2 NAME				SIGNATI	JRE												
3 NAME				SIGNATI	JRE												
FOR THE USE OF CDC PERS	SONNEL ONLY																
NAME SI	IGNATURE			STAM	IP												
ISSUER / R/TA NAME			SECURIT	Y ID	TI	RANS	SACT	ION	ID		B/T	A ID			DAT	F	
			02001111				-A01	.511							באו	_	
SAVED BY				SIGNATI	JRE						[DATE					
POSTED BY				SIGNATI	JRE						[DATE					
SIGNATURE(S) OF AUTHORIZED SIGNATORY(ies).																	

The issuer is requested to issue and handover certificates in respect of the above-mentioned securities to GEM Linked Accountholder named above, in exchange for this Securities Withdrawal Form.