



REDEMPTION OF UNIT HOLDING REQUEST FORM



ABOUT THIS FORM

This form is to be completed by unit holders wishing to redeem either partially or their entire unit holding with FHUT.

Please check all details, then complete the relevant areas of the form and return it to:

FHL Fund Management Limited

Ground Floor, Ra Marama, 91 Gordon Street, P.O. Box 2110, Government Buildings, Suva, Fiji Islands

Tel: (679) 331 -1120 or 331-1752

Mob: (679) 999-1718

Fax: (679) 331-1753

Email: fhhtml@fijianholdings.com.fj

1. PLEASE PROVIDE YOUR NAME AND ACCOUNT NUMBER HERE

FHUT ACCOUNT NUMBER:

Account Name/s

2. ACCOUNT DETAILS (Tick as appropriate)

- Individual Joint Minor Trust/Club/Group
- Company Village/Mataqali/ Yasana/Tikina Other (Specify) _____

Please state reason for withdrawal request:

3. MAKE A REDEMPTION REQUEST (Tick as appropriate)

- Full Redemption Partial Redemption *(If you are selecting Partial Withdrawal, please indicate the amount to be withdrawn in the box below.*

Amount \$

Cash cheque request *(Note maximum amount payable is FJD1500 and RBF Rounding Policy will be applied)*

Please make redemption cheque payable to:

(Refer to Indemnity Clause as per section 7)

4. DISPATCH DETAILS OF REDEMPTION REQUEST: (Tick as appropriate)

- Please Counter collect Deposit in nominated account as per instructions in section 5
- Other please specify _____

5. NOMINATED BANK ACCOUNT DETAILS

Account Name		Name of Bank	
Account No.		Branch	

6. CONTACT DETAILS:

Telephone (H)	Work	Mobile	Fax	Email
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

7. INDEMNITY CLAUSE

I/We, _____, a unit holder and Authorized trustee/s of the FHUT Account No: 100 _____, hereby request for cheque to be made payable to _____.

Tick If Appropriate

PLEASE PAY CASH

Request your approval to withdraw some funds from this Account. We also authorize for a **Cash Cheque** to be made payable to: _____ and to be dispatched from your office.

CAPITAL LOSS

Wish to acknowledge that I/we fully understand the capital loss and the terms and conditions of my/our withdrawal from our Fijian Holdings Unit Trust investment account during this short-period. I/we have also been well advised by a licensed representative of the capital loss I/we will face if I/we withdraw our investment in less than 3 to 5 years.

I/We, Hereby release from all liability, indemnify and shall keep indemnified FHL FML, FHL, FHUT and FHL Trustees Ltd in respect of any claim of any nature whatsoever at any time made against any one or more of the said entities by any person or entity including but not limited to **me/us** where such a claim arises out of or is associated with the sale of units with Fijian Holdings Unit Trust.

SIGNATURE OF UNITHOLDERS – THIS MUST BE COMPLETED BY THE AUTHORISED SIGNATORY/ (RIES)

	NAME (UNITHOLDER/TRUSTEE/DIRECTOR)	SIGNATURE
1		
2		
3		
4		

This form must be signed by the unit holder on the Company Seal (for company investors only)

(AFFIX COMPANY SEAL)

CHECKLIST (Tick ✓ as appropriate)

The following lists the required documentations that must be submitted with this redemption form.

Type of Investor	Details Required With Application Form	Signature(s) required	Checklist
Individual	<ul style="list-style-type: none"> Valid Photo Identification 	Individual	
Joint Unit holders	<ul style="list-style-type: none"> Valid Photo Identification 	Both investors	
Company	<ul style="list-style-type: none"> Valid Photo Identification of the Directors/ Trustees. Minutes of the Board meeting indicating resolution to redeem. Company Seal 	Directors as per board minutes and current Form 203	
Trust or Groups	<ul style="list-style-type: none"> Valid Photo Identifications of Trustees Minutes of the last Board/Group meet indicating resolution to redeem. Seal for registered Trusts 	All the Trustees	
Deceased Estate	<ul style="list-style-type: none"> The Executor's name ATF Estate name Documents relating to the estate <ul style="list-style-type: none"> - Probate - Letters of Administration - Valid Photo Identification 	Executor or Administrator of Estate	

* In the case of Third Party cheques, the following requirements are to be provided by the Investor(s):

- Valid Identification of both the Investor(s) and the third party.
- Authorization letter informing us the details and name of the person the cheque is to be made payable to.

For all non-face to face customers all documents must be certified by Justice of Peace, Notary or Legal Practitioner.

Signatures must match initial records (or most recent update) before processing of redemption request can be facilitated, furthermore any Investor/(s) who do not or refuse to produce adequate identification documents maybe refused the transaction by FHL FML. Statutory Declaration to be provided only by investor if name printed on Identification card differs from name registered with FHUT.

Documents Pending (Comments)	
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Accepted by FHL FML: _____ Signature: _____ Date & Time: _____

DO NOT COMPLETE OFFICE USE ONLY – VERIFICATION PROCESS

PROCESSED BY		DATE/TIME	
ACCOUNT NAME		ACCOUNT NO	

1. Full Redemption Partial Redemption

2. Account balance before redemption request / /

3.

(Total no. of units redeeming) (No. of units) (date)

(confirmed exit price/unit) Redemption Value (Add Dividend Carried Forward Balance if applicable)

4. Cash cheque request (Note maximum amount payable is FJD1500 and RBF Rounding Policy will be applied)

5. Certificates to be used in redemption:

Certificate Number	Amount of units to be redeemed	Certificate Number	Amount of units to be redeemed	Certificate Number	Amount of units to be redeemed
TOTAL		TOTAL		TOTAL	

6. Checking of Signatures 7. Checking of encumbrances

8. Please make redemption cheque payable to:

9. New unit balance Date / /

10. Supporting Documents Attached

Valid Copy of ID	
Support/Authorization letter (specify)	
Others, specify	

VERIFIED BY		DATE/TIME	
APPROVED BY		DATE/ TIME	

REDEMPTION PROCESSING – PART TWO

FINANCE		REGISTRY	
CHEQUE NO:		CREATION NO:	
CHEQUE AMOUNT:		REGISTRY UPDATE (TIME/DATE) (INITIAL)	
DISPATCHED BY:		COMMENTS	
DISPATCHED (DATE/MODE)			

