



# Shahjalal Equity Management Limited

Al -Razi Complex

166-167 Syed Shahid Nazrul Islam Sarani, Level-9, Suite-901

Block-C, Dhaka-1000

## Fund Withdrawal Application Form

*Please fill in all necessary information carefully on your fund withdrawal request*

Request Date	
Client Account No.	
Name of The Account Holder (Single)	
Name of The Account Holder (Joint)	
Contact No.	
Bank Account No-13 Digit (as per BO Account)	
Name of the Bank	
Name of the Branch	
Routing No.	
Withdrawal Amount (Tk.)	
In words	

*I/We do hereby declare that no purchase will be made against the amount request for withdrawal as well as the proportionate loan amount*

\_\_\_\_\_  
Signature of the Principal Account holder

\_\_\_\_\_  
Signature of the Joint Account holder