Securities code (ISIN) application form
for investment fund units and temporary investment fund units

To be completed by the Central Depository!											
ISIN:											
Date of ISIN allocation:											

1.   Fund manager data:

1/a   Official full name: _____
_____

1/b   Short name: _____

1/c   Seat (zip code, city, street, house number)
☐ ☐ ☐ ☐ _____

1/d   Tax number: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ – ☐ – ☐ ☐

1/e   Trade registry number: ☐ ☐ – ☐ ☐ – ☐ ☐ ☐ ☐ ☐ ☐

1/f   MNB sector code: ☐

2.   Investment fund data:

2/a   Full name of the fund: _____

2/b   Form of operation: ☐ public   ☐ private

2/c   Category: ☐ open-end   ☐ closed-end

2/d   Type based on primary asset category: :   ☐ securities fund   ☐ real estate fund
☐ venture capital fund ☐ private capital fund

2/e   End of fund maturity (year, month, day):   ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

3.   Sub-fund data:

3/a   Full name of the sub-fund:_____

3/b   Form of operation: ☐ public   ☐ private

3/c   End of sub-fund maturity (year, month, day):   ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

4.   Investment fund unit data:

4/a   Name: _____

4/b   Form of insturment: ☐ physical   ☐ dematerialized

4/c   Method of issue: ☐ public   ☐ private

4/d   Date of issue (year, month, day):   ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

4/e   Currency: ☐ ☐ ☐

4/f   Face value: ☐ ☐ ☐.☐ ☐ ☐.☐ ☐ ☐.☐ ☐ ☐,☐ ☐ ☐

4/g   Total face value of issued securities series: ☐ ☐ ☐.☐ ☐ ☐.☐ ☐ ☐.☐ ☐ ☐,☐ ☐ ☐

4/h   Maturity: ☐ definite   ☐ indefinite

4/i.   Maturity date: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

5.   Temporary investment fund unit:

5/a.   Capital contribution made (percent or at face value):
☐ ☐ % or ☐ ☐ ☐.☐ ☐ ☐.☐ ☐ ☐.☐ ☐ ☐,☐ ☐ ☐

5/b.   Deadline to meet payment obligation: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

5/c.   ISIN applied for the final investment fund unit series: HU ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

6. Applicant data:

Applicant name: _____

   Mailing address, e-mail address, phone number: _____

Please issue the invoice on the ISIN administration fee to the following name: _____

Please send the invoice electronically to the below e-mail address or mail the paper invoice to the following mailing address:
_____

Please send confirmation of the ISIN application to the following e-mail address or mailing address:
_____

Date: _____   _____ (year, month, day)

....
Applicant signature