

Account Application (Direct/ISA/ISA Transfer)

Please complete this form in full, answering ALL questions clearly. Incomplete forms will cause application delays or may be rejected. For extra applications, visit our website at www.mbstructuredinvestments.com.

| 1. Your Details | | | |
|------------------------|-------------|-------------|--|
| | Applicant 1 | Applicant 2 | |
| Title(Mr, Mrs, Miss, M | s): | | |
| Surname: | | | |
| Forename(s): | | | |
| Permanent address: | | | |
| | | | |
| | | | |
| | | | |
| Date of birth: | | | |
| Occupation: | | | |
| Contact tel no: | | | |
| Email Address: | | | |

National Insurance (NI):

You can find your NI number on a payslip, form P45 or P60, letters from HM Revenue and Customs or the Benefits Agency, or Pensions Order Book.

| Are you a US Citizen? | Yes | No | Yes | No |
|---|-----|----|-----|----|
| Are you a resident in the UK for tax purposes? | Yes | No | Yes | No |
| Are you a resident for tax purposes in any other country? | Yes | No | Yes | No |

If yes please provide details of the Country(ies) and Tax Reference(s):

(Please list details of any additional individuals on a separate sheet)

For direct investments only, on behalf of a child (under 18), please fill in the child's name and date of birth below:

| Full Name: | Date of birth: |
|----------------------|-----------------------|
| 2. Your bank details | |
| Bank: | Account holder(s): |
| Account Number: | |
| Bank sort code - | - Reference (if any)/ |
| | Roll number: |

3. Provision of Future Information

If you do not have a personal email address, or you would like emails to be sent to a different address please state that email address below.

Alternative email address:

By signing the Declaration for your application you are authorising us to send notifications and information in relation to your investment to the email address you have provided.

For security purposes, please provide us with a password so we can give you information over the telephone:

4. Investment (minimum £5000)

| Plan No. | Plan Name | Investment type & amount Direct ISA ISA (2025/26) Transfer | | Adviser Charge % or £ | Total amount including charges | |
|-------------|--|--|--|-----------------------------|---|--|
| 9819 | UK/Europe 6Y Annual Step Down to 75 Kick Out Deposit Plan June 2025 | | | | | |

Please indicate how you have acquired the money you are investing:

| Accumulated savings | Property Sale |
|---------------------|--------------------------------|
| Employment | Reinvestment of matured funds |
| Inheritance | Transfer from another provider |
| Pension lump sum | Other (please describe) |

Payment:

Please send funds via electronic bank transfer. If your bank is operating Confirmation of Payee, it should confirm that you are paying 'Meteor Investment Management Limited'. The details you require are:

Meteor Investment Management Limited Client Account HSBC Bank plc Sort Code: 40-05-30 Account Number: 13692752 IBAN: GB21MIDL40053013692752

We strongly discourage cheques as they can increase the risk of your application being delayed and being subject to additional charges. Tick here if you are paying by cheque:



UK/Europe 6Y Annual Step Down to 75 Kick Out Deposit Plan June 2025 | BA9819

5. Appropriateness Questions and Declaration

| 1. | Have you been investing for 5 years or mo | Yes | No | | | |
|----|--|---|---|----|--|--|
| 2. | Have you received investment advice? If " if you select "NO" and this Plan requires yo process your application. | • | Yes | Νο | | |
| 3. | Looking at the categories of investor set out below, which one of the following characteristics best describes you? | | | | | |
| | Basic Investor | Informed Investor | Advanced Investor | | | |
| | products and/or no financial industry | Average knowledge of relevant financial products and/or some financial industry experience. | Good knowledge of relevant financial products and/or financial industry experience. | | | |
| 4. | Please indicate if you hold, or have held, any of the following investments? | | | | | |
| | Bank Deposits | Stocks and shares ISAs | | | | |
| | Direct equity investment | Structured Products | | | | |
| | EIS/VCT | Unit Trusts | | | | |
| 5. | Have you received and read a copy of the Key Information Document (KID) for this Plan? | | Yes | Νο | | |
| 6. | Are the following statements true? | | Yes | No | | |

I/We:

- **b** confirm that the potential returns available from the Plan are consistent with my/our investment objectives.
- understand the various factors that will influence the capital and potential returns payable from this Plan, and that in adverse market conditions, this may mean that I/we will not receive any interest or investment return at all.
- am/are willing and financially able to bear the risk of this investment, including the risk of loss to my/our money.
- understand the benefits of diversification and that this Plan should only form part of my/our overall investment portfolio.
- understand that the Plan is designed to be held for the full investment term; and if I/we were to encash early, the amount that I/we would receive would depend on the value of the investment at the date of sale; and this value could be less than the amount that I/we invested.
- understand that I/we may lose some, or all, of my/our investment, including any interest or investment returns to which I/we would otherwise have been entitled to if the bank became unable to meet its obligations at maturity or earlier encashment.
- understand the charges associated with the Plan.
- understand the personal tax implications of my/our investment.
- understand the compensation arrangements applicable to the Plan.
- am/are the type of investor that this Plan is designed for, as set out in the brochure.

If NO, please provide details below:

If NO, please provide details below:

6. Adviser Details

Firm Name: Adviser: Financial Services Register Number: Branch:

7. Adviser Declaration

- I confirm that all dealings with the investor have been carried out in accordance with the requirements of the FCA Handbook and in accordance with my obligations under Meteor's current Terms of Business.
- I acknowledge my responsibility to evaluate all information on the Plan and confirm that where I have given advice, I have the necessary knowledge and experience to be deemed competent to assess the Plan and its suitability to an applicant's circumstances and investment objectives.
- ▶ I have provided the investor with a Plan Brochure and Key Information Document.
- I declare that this application has been completed to the best of my knowledge and belief and I have agreed any adviser charge with the applicant.
- I confirm that I have carried out the appropriate identity checks on all parties relevant to this application and have retained copies of the completed Verification of Identity Certificates and supporting documentation, which I understand Meteor may request at any time and may rely on.
- ▶ I confirm that I have determined that the applicant meets the criteria to invest in this Plan.

Signed:

Date:

Date:

Date:

8. Declaration

I/We declare that I/we:

- ▶ am/are 18 years of age or older.
- ▶ have carefully read the Key Information Document, the Plan Brochure and the Terms and Conditions.
- agree that Meteor will hold personal and financial information on me/us for the purposes set out in the Terms and Conditions only.
- accept the terms under which the Plan will be managed and the mode of providing me/us with information concerning the Plan.
- have completed this form to the best of my/our knowledge and belief and the information given in the application, whether in handwriting or not, is true and complete.
- am/are not, or acting on the behalf of, a resident of the United States and that I/we will not assist any person who is so resident.
- ▶ agree to inform Meteor immediately should I/we become resident(s) of the United States.
- ▶ agree to inform Meteor immediately should there be any change in my/our residency for tax purposes.
- ▶ will inform Meteor without delay of any change in my/our circumstances affecting any of the information in this form.
- have agreed the amount of any initial adviser charge as shown overleaf and note that the agreed terms will be confirmed to me by Meteor on acceptance of such instruction.

I/We authorise Meteor:

- to hold my/our cash subscription, Direct investments, ISA investments, interest, dividends and other rights or proceeds in respect of those investments and any cash or other proceeds.
- ▶ to make on my/our behalf any claims to relief from tax in respect of ISA investments.

I/We understand that:

- Meteor does not provide investment advice and confirm that I/we either do not require such advice or have received advice on this investment from a financial adviser as shown above.
- if I/we have not received advice for a Plan which requires me/us to take advice, Meteor will be unable to process my/our application.
- if I/we have received financial advice, I/we confirm my/our financial adviser is not acting as agent to the Issuer or its affiliates.

Also applicable to all ISA Applicants:

I declare that:

- ▶ I apply to subscribe for a cash ISA.
- ▶ all subscriptions made, and to be made, belong to me.
- I have not subscribed and will not subscribe more than the overall subscription limit in total to cash ISAs, stocks and shares ISAs, Innovative Finance ISAs and Lifetime ISAs in the same tax year.
- I am resident in the United Kingdom for tax purposes or, if not so resident, perform duties which, by virtue of section 28 of Income Tax (Earnings and Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or, am married to, or in a civil partnership with, a person who performs such duties, and I will inform Meteor immediately if I cease to be so resident or to perform such duties, or be married to, or in a civil partnership with, a person who performs such duties.

| Signed: | | | |
|---------|--|--|--|
| Signed: | | | |

Note: If you have filled in and signed this Application Form, please send it to Meteor Asset Management Limited, 24/25 The Shard, 32 London Bridge Street, London, SE1 9SG or back to your financial adviser to submit the form.

For ISA Transfers please also complete and return the Existing ISA Transfer Request form on the following page.

M03463_15 April 2025



Existing ISA Transfer Request

Please complete this form in full, answering ALL questions clearly. Incomplete forms will cause application delays or may be rejected. For extra applications, visit our website at www.mbstructuredinvestments.com. 1. Account Details

| MBSI Account | No: | | | | |
|------------------|---------------------------|--------------------------------|------------|-------------------|----|
| Title(Mr, Mrs, N | /liss, Ms): | Forename (s): | | | |
| Surname: | | | | | |
| Permanent add | dress: | | | | |
| | | | | | |
| Date of birth: | | | NI Number: | | |
| 2. Transfer | details | | | | |
| Please indicate | e the amount to be transf | erred: | | | |
| Please indicate | e the type of ISA : | Cash | | Stocks and Shares | |
| ISA Account nu | umber: | | | Sort Code: - | - |
| Name of Invest | tment: | | | | |
| 1. Have yo | ou subscribed to your cu | urrent ISA in the current tax | year? | Yes | No |
| 2. Do you | wish to: | | | | |
| Close yo | our account and transfer | the balance plus interest? | | Yes | No |
| if no, do | o you wish to: | | | | |
| Transfer | your current year subscri | ption as part of the transfer? | | Yes | No |

Name of Existing ISA Manager:

Transfer your current year subscription only?

Address:

Special Instructions:

3. Declaration

In respect of the ISA Account detailed above I authorise my existing ISA manager to:

- 1. Transfer the cash value of the ISA together with any interest, dividends, rights and cash within the account, or the amount specified, as appropriate, to Meteor Investment Management Limited.
- 2. Provide Meteor with any information, written or non-written, and to accept any instructions from them relating to the transfer.
- 3. Ensure that all dividends, interest & tax credits arising after the transfer are paid to me.
- 4. a) Proceed immediately with the transfer and, where a period of notice is required for closure/part transfer, apply any consequential penalty (delete as appropriate); OR
 - b) Proceed with the transfer only after the full notice period has expired (delete as appropriate).

Signed:

Date:

Yes

No

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Please ensure that you complete the Existing ISA Transfer Request form on the previous page. Incomplete forms WILL cause delays or result in rejection.