## **Broker Solutions**



## 4 Year 6.7% Annual Distribution Bond & Eurozone Bonus Builder Bond 2 Application Form

Please note that by signing this Application Form, you are confirming that you have read and understood the material in the Bond Brochure and Base Prospectus and that you have received advice from your Financial Broker in relation to the suitability and appropriateness of the investment for you. If you are unclear about any of the information presented in the Brochure or Base Prospectus or about the suitability of the investment for you, please seek further advice from your Financial Broker before completing this Application Form.

In order to effect the investment, unless you are an insured pension investor, you may also need to open an Account with Omnium Investment Platform ("Omnium") or an Account with Conexim Investment Platform ("Conexim"). Where appropriate, the Omnium or Conexim Account Opening Form is included within the investment pack of documentation for your completion.

## 1. Investor Information

**Please complete Section A and Section D** in BLOCK CAPITALS and return to your Financial Broker for onward transmission to Broker Solutions thereafter.

If you are a **Pension Investor**, please complete **Section B** in addition to Sections A and D.

If you are a Corporate/Company investor, please complete Section C in addition to Sections A and D.

I/We herby apply for a Broker Solutions

- 1. 4 Year 6.7% Annual Distribution Bond
- 2. Eurozone Bonus Builder Bond 2

A. Personal Information			
Primary Name*:	Date of Birth:		
Address*:	Occupation:		
Telephone Number (Home):	Mobile Number:		
Email Address:	Nationality:		
PPS Number:	Country of Residence:		
Secondary Name*:	Date of Birth:		
Address*:	Occupation:		
Telephone Number (Home):	Mobile Number:		
Email Address:	Nationality:		
PPS Number:	Country of Residence:		

If you are a Personal Investor and your investment is being made together with another person you acknowledge that the investment will be a joint investment between the persons named herein.



Scheme Name:  Scheme Provider Name:  Scheme Provider Name:  Pension Country of Residence:  Revenue Number (if applicable):  Please provide the Personal Information for the Beneficial Owner in Section A above.  C. Corporate Investors  Entity Name:  Country of Residence:  Address:  Company Phone:  Company Phone:  Company Registration Number:  Legal Entity Identifier (LEI):  Primary Contact Name:  Primary Contact Name:  Primary Contact Email:  Please provide the Personal Information for the Authorised Director(s) in Section A above.  D. All Investors  Foreign Account Tax Compilance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor:  Yes No Secondary Inve	B. Pension/Post Retirement Investors					
Pension Country of Residence:  Revenue Number (if applicable):  Please provide the Personal Information for the Beneficial Owner in Section A above.  C. Corporate Investors  Entity Name:  Address:  Company Phone:  Company Phone:  Company Registration Number:  Legal Entity Identifier (LEI):  Primary Contact Name:  Primary Contact Email:  Please provide the Personal Information for the Authorised Director(s) in Section A above.  D. All Investors  Foreign Account Tax Compliance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor:  Yes No Secondary Investor:  Country/Territory:  TIN:  Source of Wealth & Source of Funds Source of Wealth:  Eg: Surplus Earned Income, Investment Gain or Income from Sale of Asset(s), Retirement Lump Sum, Maturing Investment, inheritance etc.  Source of Funds: Payment by: (A) Cheque (drawn on an account in the name of the investor(s)	Scheme Name:	Pre or Post Retirement:				
Revenue Number (if applicable):  Please provide the Personal Information for the Beneficial Owner in Section A above.  C. Corporate Investors  Entity Name:  Address:  Company Phone:  Company Phone:  Company Registration Number:  Legal Entity Identifier (LEI):  Primary Contact Name:  Primary Contact Phone:  Primary Contact Email:  Please provide the Personal Information for the Authorised Director(s) in Section A above.  D. All Investors  Foreign Account Tax Compliance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor:  Yes No Secondary Investor:  Yes No  Common Reporting Standards: Are you resident in any country or territory other than Ireland for tax purposes?  Primary Investor:  Yes No  If Yes, please list below the countries/territories in which you are resident and provide the relevant Tax Identification Number(s) (TIN) in each case:  Primary Investor:  Country/Territory:  TiN:  Secondary Investor:  Country/Territory:  TiN:  Source of Wealth & Source of Funds  Source of Wealth:  Eg: Surplus Earned Income, Investment Gain or Income from Sale of Asset(s), Retirement Lump Sum, Maturing Investment, Inheritance etc.  Source of Funds:  Payment by:  (A) Cheque (drawn on an account in the name of the investor(s)	Scheme Provider Name:	Scheme Type:				
C. Corporate Investors  Entity Name:  Country of Residence:  Address:  Company Phone:  Company Phone:  Company Registration Number:  Legal Entity Identifier (LEI):  Primary Contact Name:  Primary Contact Email:  Please provide the Personal Information for the Authorised Director(s) in Section A above.  D. All Investors  Foreign Account Tax Compliance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor:  Yes No Secondary Investor:  Yes No If Yes, please list below the countries/territories in which you are resident and provide the relevant Tax Identification Number(s) (TIN) in each case:  Primary Investor:  Country/Territory:  Secondary Investor:  Country/Territory:  Secondary Investor:  Country/Territory:  Secondary Investor:  Country/Territory:  Secondary Investor:  Secondary Investor:  Country/Territory:  Secondary Investor:  Secondary Investor:  Country/Territory:  TIN:  Secondary Investor:  Country/Territory:  TIN:  Source of Wealth & Source of Funds  Source of Wealth:  Eg: Surplus Earned Income, Investment Gain or Income from Sale of Asset(s), Retirement Lump Sum, Maturing Investment, Inheritance etc.  Source of Funds:  Payment by: (A) Cheque (drawn on an account in the name of the investor(s)	Policy/Plan/Account Number:	Pension Country of Residence:				
Entity Name: Country of Residence:  Address:  Company Phone: Website Address:  Company Registration Number: Revenue Number:  Legal Entity Identifier (LEI):  Primary Contact Name: Primary Contact Phone:  Primary Contact Email:  Please provide the Personal Information for the Authorised Director(s) in Section A above.  D. All Investors  Foreign Account Tax Compliance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor: Yes No Secondary Investor: Yes No  Common Reporting Standards: Are you resident in any country or territory other than Ireland for tax purposes?  Primary Investor: Yes No If Yes, please list below the countries/territories in which you are resident and provide the relevant Tax Identification Number(s) (TIN) in each case:  Primary Investor: Country/Territory: TIN:  Secondary Investor: Country/Territory: TIN:  Secondary Investor: Country/Territory: TIN:  Source of Wealth & Source of Funds  Source of Wealth & Source of Funds  Source of Funds:  Payment by: (A) Cheque (drawn on an account in the name of the investor(s)	Revenue Number (if applicable):					
Entity Name:  Address:  Company Phone:  Company Registration Number:  Legal Entity Identifier (LEI):  Primary Contact Name:  Primary Contact Phone:  Primary Contact Email:  Please provide the Personal Information for the Authorised Director(s) in Section A above.  D. All Investors  Foreign Account Tax Compliance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor:  Yes No Secondary Investor:  Yes No  Common Reporting Standards: Are you resident in any country or territory other than Ireland for tax purposes?  Primary Investor:  Yes No Secondary Investor:  Yes No If Yes, please list below the countries/territories in which you are resident and provide the relevant Tax Identification Number(s) (TIN) in each case:  Primary Investor:  Country/Territory:  TiN:  Source of Wealth & Source of Funds  Source of Wealth & Source of Funds  Source of Wealth & Source of Funds  Source of Funds:  Payment by:  (A) Cheque (drawn on an account in the name of the investor(s)	Please provide the Personal Information for the Beneficial Owner in Sec	ction A above.				
Address:  Company Phone:  Revenue Number:  Legal Entity Identifier (LEI):  Primary Contact Name:  Primary Contact Email:  Please provide the Personal Information for the Authorised Director(s) in Section A above.  D. All Investors  Foreign Account Tax Compliance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor:  Yes No Secondary Investor: Yes No Common Reporting Standards: Are you resident in any country or territory other than Ireland for tax purposes?  Primary Investor: Yes No Secondary Investor: Yes No Secondary Investor: Tives, please list below the countries/territories in which you are resident and provide the relevant Tax Identification Number(s) (TIN) in each case:  Primary Investor: Country/Territory: Tin: Secondary Investor: Country/Territory: Tin: Secondary Investor: Country/Territory: Tin: Secondary Investor: Country/Territory: Tin: Source of Wealth: Eg: Surplus Earned Income, Investment Gain or Income from Sale of Asset(s), Retirement Lump Sum, Maturing Investment, Inheritance etc. Source of Funds: Payment by: (A) Cheque (drawn on an account in the name of the investor(s)	C. Corporate Investors					
Company Phone:  Company Registration Number:  Legal Entity Identifier (LEI):  Primary Contact Name:  Primary Contact Email:  Primary Contact Email:  Please provide the Personal Information for the Authorised Director(s) in Section A above.  D. All Investors  Foreign Account Tax Compliance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor:	Entity Name:	Country of Residence:				
Company Registration Number:  Legal Entity Identifier (LEI):  Primary Contact Name:  Primary Contact Email:  Please provide the Personal Information for the Authorised Director(s) in Section A above.  D. All Investors  Foreign Account Tax Compliance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor:  Yes No  Secondary Investor:  Yes No  Common Reporting Standards: Are you resident in any country or territory other than Ireland for tax purposes?  Primary Investor:  Yes No  Secondary Investor:  Yes No  If Yes, please list below the countries/territories in which you are resident and provide the relevant Tax Identification Number(s) (TIN) in each case:  Primary Investor:  Country/Territory:  TiN:  Secondary Investor:  Country/Territory:  TiN:  Source of Wealth & Source of Funds  Source of Wealth:  Eg: Surplus Earned Income, Investment Gain or Income from Sale of Asset(s), Retirement Lump Sum, Maturing Investment, Inheritance etc.  Source of Funds:  Payment by:  (A) Cheque (drawn on an account in the name of the investor(s)	Address:					
Legal Entity Identifier (LEI):  Primary Contact Name:  Primary Contact Email:  Please provide the Personal Information for the Authorised Director(s) in Section A above.  D. All Investors  Foreign Account Tax Compliance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor:  Yes No Secondary Investor:  Yes No Common Reporting Standards: Are you resident in any country or territory other than Ireland for tax purposes?  Primary Investor:  Yes No Secondary Investor:  Yes No If Yes, please list below the countries/territories in which you are resident and provide the relevant Tax Identification Number(s) (TIN) in each case:  Primary Investor:  Country/Territory:  Secondary Investor:  Country/Territory:  TIN:  Source of Wealth & Source of Funds  Source of Wealth:  Eg: Surplus Earned Income, Investment Gain or Income from Sale of Asset(s), Retirement Lump Sum, Maturing Investment, Inheritance etc.  Source of Funds:  Payment by:  (A) Cheque (drawn on an account in the name of the investor(s)	Company Phone:	Website Address:				
Primary Contact Name:  Primary Contact Email:  Please provide the Personal Information for the Authorised Director(s) in Section A above.  D. All Investors  Foreign Account Tax Compliance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor:	Company Registration Number:	Revenue Number:				
Primary Contact Email:  Please provide the Personal Information for the Authorised Director(s) in Section A above.  D. All Investors  Foreign Account Tax Compliance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor:	Legal Entity Identifier (LEI):					
Please provide the Personal Information for the Authorised Director(s) in Section A above.  D. All Investors  Foreign Account Tax Compliance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor:	Primary Contact Name:	Primary Contact Phone:				
Primary Investor:    Yes	Primary Contact Email:					
Foreign Account Tax Compliance Act (FATCA): Are you a citizen of, or resident for tax purposes in the US?  Primary Investor:	Please provide the Personal Information for the Authorised Director(s) i	in Section A above.				
Primary Investor: Yes No    Secondary Investor: Yes No   No	D. All Investors					
Primary Investor: Yes No  Secondary Investor: Yes No  If Yes, please list below the countries/territories in which you are resident and provide the relevant Tax Identification Number(s) (TIN) in each case:  Primary Investor: Country/Territory: TIN:  Secondary Investor: Country/Territory: TIN:  Source of Wealth & Source of Funds  Source of Wealth:  Eg: Surplus Earned Income, Investment Gain or Income from Sale of Asset(s), Retirement Lump Sum, Maturing Investment, Inheritance etc.  Source of Funds:  Payment by: (A) Cheque (drawn on an account in the name of the investor(s)	Primary Investor: Yes No	of, or resident for tax purposes in the US?				
Source of Wealth & Source of Funds  Source of Wealth:  Eg: Surplus Earned Income, Investment Gain or Income from Sale of Asset(s), Retirement Lump Sum, Maturing Investment, Inheritance etc.  Source of Funds:  Payment by:  (A) Cheque (drawn on an account in the name of the investor(s)	Primary Investor: Yes No Secondary Investor: Yes No  If Yes, please list below the countries/territories in which you are resident and provide the relevant Tax					
Source of Wealth & Source of Funds  Source of Wealth:  Eg: Surplus Earned Income, Investment Gain or Income from Sale of Asset(s), Retirement Lump Sum, Maturing Investment, Inheritance etc.  Source of Funds:  Payment by:  (A) Cheque (drawn on an account in the name of the investor(s)	Primary Investor: Country/Territory:	TIN:				
Source of Wealth:  Eg: Surplus Earned Income, Investment Gain or Income from Sale of Asset(s), Retirement Lump Sum, Maturing Investment, Inheritance etc.  Source of Funds:  Payment by:  (A) Cheque (drawn on an account in the name of the investor(s)	Secondary Investor: Country/Territory:	TIN:				
	Source of Wealth:  Eg: Surplus Earned Income, Investment Gain or Income from Sale of Inheritance etc.  Source of Funds:  Payment by:  (A) Cheque (drawn on an account in the name of the same of the s					
(C) Existing Omnium/Conexim Account  Note: Drafts will not be accepted.						

Basic (e.g. have ne	ver made an inves	tment decision be	fore)		
Informed (e.g. have	e made a number o	of investments in t	:he past)		
Advanced (e.g. mal					
			,		
Oo you have any other ex	xperience or train	ing relevant to m	aking investment	decisions?	
Yes No					
f yes, please provide any	details:				
Please tick box A, B or C nvestments made and w					number of
Investment Type	(A) Basic Knowledge & Experience	(B) Informed Knowledge & Experience	(C) Advanced Knowledge & Experience	Number of Investments in the last 5 years	Advised by a Financial Broker (Y/N)
Equities					
Bonds					
Alternatives (commodities, hedge funds, private equity etc.)					
Real Estate					
Funds (all collective investments)					
Tax Based Investments					
Derivatives					
Structured Products (Capital Protected)					
Structured Products (Capital at Risk)					
you understand the risk	ks of the investmen	nt, including the p	otential that you o	could Yes	No
se some or all of the amo		, ,	,		
you understand that th		_			No
vestment term and if you the value of the Notes o	-				
ss than the amount you i		aute of sale and	anac ans value cou		
you understand that if N	Morgan Stanley or F	Barclays Bank Irola	and is unable to na	v the Yes	No
nount due when the inve	estment matures,	or on earlier enca	ashment, you may	lose	
me or all of your initial in ight have otherwise expe		as any future pote	ential return whicl	n you	
Bur Have otherwise expe	.c.cu:				
e your Investment Obje scribed in Section 2.2 of		rofile consistent v	vith the Target M	arket Yes	No
			tion under any De	posit Yes	No
you understand that yo otection Scheme as a res				P 00:0	

2. Application Amount							
I/We wish to invest €	in the Broker Solutions 4 Year	6.7% Annual Distribution Bond.					
I/We wish to invest €	in the Broker Solutions 4 Year	Eurozone Bonus Builder Bond 2.					
(€25,000 minimum investment amount in each Bond in der Account to do so.	nominations of €1,000) and if necessa	ary, to open an Omnium or Conexim					
	You must submit your Application and all supporting documentation to your Financial Broker in full before the Closing Date on 30 April 2025. You may cancel your investment before the Closing Date on 30 April 2025 but your investment may not be cancelled on any date thereafter.						
3. Investor Declarations (Please confirm I	by ticking the boxes)						
I/We declare that the details above are correct, and th	at						
I/We are over 18 and confirm that							
I/We understand the Key Features and Terms & Condi	tions of the chosen Bond set out in th	ne Brochure and Base Prospectus.					
I/We confirm that the Bond is consistent with my/our	Investment Objectives and Risk Profi	le.					
I/We understand that the indicative terms outlined in will not be known until 9 May 2025.	the relevant Brochure are subject to	change and that the final terms					
I/We understand that I/We can lose some or all of the	amount invested in either Bond.						
I/We understand that the investment will not be deem that, if and when accepted, the investment will comm		ication has been accepted and					
Where applicable, I/we confirm that I/we have receive I/We have read and understood this document and its		Account Documentation and that					
Where applicable, I/we hereby request and authorise the name of Pershing Securities International Limited		ount in a Client Asset Account in					
Where applicable, I/we hereby authorise you to transi	mit to Omnium or Conexim, client inf	ormation you hold on me.					
Primary Signature: Date:							
Secondary Signature:		Date:					
Warning: If you invest in the Bond you may lose some of	or all of the money you invest.						
Warning: The value of your investment can go down as	s well as up						
Warning: Deductions for costs and charges are not made uniformly throughout the life of the product, but are loaded disproportionately onto the early period. If an investor sells the Bond prior to the end of the 4 year term, the practice of front-end loading will impact on the amount of money that the investor receives. The investor may not get back the full amount they invested.							
4. Trustee Consent							
We confirm that we act as trustees for the scheme	and as co-signatories for the inv	restment:					
Trustee Name:							
Primary Signature:		Date:					
Secondary Signature:		Date:					

5. The General Data Protection Regulation (GDPR) Consent:						
I/we authorise Broker Solutions to hold my/our personal data on file and to process it for the purposes intended.						
Primary Signature: Date:						
Secondary Signature: Date:						
6. Financial Broker Declarations (Please confirm by ticking the boxes)						
We have conducted a full review of this investor's financial circumstances.						
The chosen Bond (in the form of Notes or Certificates involving derivatives and therefore a complex product) is suitable and appropriate for the investor.						
The investor understands the Key Features and the risks of the chosen Bond.						
The chosen Bond is suitable and appropriate for the investor and is consistent with the investor's Investment Objectives and Risk Profile.						
The investor is consistent with the Target Market described in Section 2.2 of the Brochure.						
We have advised the investor that they can lose some or all of the amount invested.						
We have advised the investor that the taxation treatment of any gains is uncertain.						
We have complied in full with the Anti Money Laundering (AML) and combating terrorist system that applies to all designated bodies.						
Where an investor has been identified as potentially vulnerable, we have followed our internal procedures in this regard.						
Where necessary, we have completed the required Investment Account Application Pack for our client for either Omnium or Conexim.						
We confirm that we are appropriately authorised by the Central Bank of Ireland to recommend this Bond to the investor and have done so in accordance with the requirements of such authorisation and also with due regard to the suitability and appropriateness approaches as laid down by the ESMA Guidance (ESMA(2014/146).						
Financial Broker Advisor Name:						
Financial Broker Firm Name:						
Financial Broker Advisor Signature:  Date:						
Warning: Please do not make any EFTs until you have received confirmation that your Omnium or Conexim Account has been opened (if you are using this Account for the first time) or is fully operational (if you have used this account before). Your Financial Broker will assist you in this regard.						
Warning: US persons may not invest in the Bond.						



## Application Checklist

will be required to open Conexim Investment Platform Accounts

1.	Completed Bond Application Form  Completed by Investor and by the Financial Broker	6	i.	Self Administered ARFs/AMRFs	
	Completed Omnium or Conexim Account Opening	_		Certified copy Management Agreement (or other relevant set up document)	
	Application Form (where applicable) Completed by Investor and by the Financial Broker	_		TRUSTEE COMPANY: Proof of Identity: Certified copy of valid Proof of Identity for	
3.	Payment			each Trustee Authorised Signatory signing the Application Form(s)	
	A) Cheques should be made payable to: Omnium Investment Platform: the Pershing Securities Client Asset Account as follows: "PSIL Client Asset Account".			<ul> <li>Proof of Address:</li> <li>Certified copy of valid Proof of Address for each Trustee Authorised Signatory signing</li> </ul>	
	Conexim Investment Platform: the Pershing Securities Client Asset Account as follows: "Pershing Securities			the Application Form(s)	.:11
	International Ltd"			Note that 2 Proofs of Address (dated within last 3 months) w be required to open Conexim Investment Platform Accounts	
	B) Electronic Funds Transfers (EFTs)  EFTs should not be made until after your Omnium or  Conexim Account is opened and/or is fully operational.			BENEFICIARY: Proof of Identity: Certified copy of valid Proof of Identity	
	Your Financial Broker will confirm the Account Details and the Payment Reference that should be used after your application has been processed and accepted.			<b>Proof of Address:</b> Certified copy of valid Proof of Address	
	Please Note that Drafts will not be accepted in any circumstance	es.		Note that 2 Proofs of Address (dated within last 3 months) w be required to open Conexim Investment Platform Accounts	
4.	Personal Investors			Companies	
	Certified Proof of Identity: Certified copy of valid passport or driving license for each Investor			Certified copy of Certificate of Incorporation	n
	Certified Proofs of Address:  Certified copy of valid (within last 6 months) Proof of Address e.g. utility bills (not mobile phone) or bank statements  Note that 2 Proofs of Address will be required to open Conexim Investment Platform Accounts (and that these must be dated within the last 3 months).			Certified copy of Memorandum and Articles of Association	
				<b>Authorised Signatory List</b>	
				Proof of Identity: Certified copy of valid Proof of Identity for each Authorised Signatory signing the Application Form	
5.	Self Administered Pensions Trusts	_		Proof of Address: Certified copy of valid Proof of Address for each Authorised Signatory signing the Application Form(s	s)
	Certified copy of the Trust Deed  Certified copy of the Revenue Approval Letter	$\exists$	Note that 2 Proofs of Address (dated within last 3 mor		rill
	TRUSTEE COMPANY:			be required to open Conexim Investment Platform Accounts  List of Shareholders	
	<ul><li>Proof of Identity:</li><li>Certified copy of valid Proof of Identity for each Trustee</li></ul>			Legal Entity Identifier (LEI) provided on	
	Authorised Signatory signing the Application Form(s)			Application Form(s)	
	Certified copy of Proof of Address for each Trustee     Authorised Signatory signing the Application Form(s)		3.	Insured Pension and Insured ARF/AMRF investors	
	Note that 2 Proofs of Address (dated within last 3 months) will be required to open Conexim Investment Platform Accounts.			All documentation and investment	
	BENEFICIARY:			instructions submitted to the relevant life company	
	<b>Proof of Identity:</b> Certified copy of valid Proof of Identity		the company	the company	
	Proof of Address: Certified copy of valid Proof of Address  Note that 2 Proofs of Address (dated within last 2 months)				