

Broker Solutions Application Form

4 Year Eurozone Bonus Builder Bond 11

Please note that by signing this Application Form, you are confirming that you have read and understood the material in the relevant Bond Key Information Document (KID) 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 relevant KID 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. **Due to the nature of this product, it is important to ensure that it remains suitable for you. We recommend that you engage with your Financial Broker on a regular basis to ensure its ongoing suitability.**

In order to effect the investment, unless you are an insured pension investor, you will need 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 hereby apply for the Broker Solutions 4 Year Eurozone Bonus Builder Bond 11

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.

B. Pension/Post Retirement Investors

Scheme Name:	Pre or Post Retirement:
Scheme Provider Name:	Scheme Type:
Policy/Plan/Account Number:	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:	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
 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: ☐ EFT
 or
☐ Existing Omnium/Conexim Account

Note: Cheques and Drafts will not be accepted.

Investor Experience/Suitability & Appropriateness

I/We would describe myself/ourselves as having the following Investment Knowledge and Experience:

- ☐ Basic (e.g. have never made an investment decision before)
- ☐ Informed (e.g. have made a number of investments in the past)
- ☐ Advanced (e.g. make regular investments on a frequent basis)

Do you have any other experience or training relevant to making investment decisions?

- ☐ Yes ☐ No

If yes, please provide any details:

Please tick box A, B or C for each of the 9 investment product categories below and indicate the number of investments made and whether you were advised by a Financial Broker in each case:

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)					

Do you understand the risks of the investment, including the potential that you could lose some or all of the amount invested?

☐ Yes ☐ No

Do you understand that the relevant Bond is designed to be held for the full 4 year investment term and if you encash it early, the amount you may receive would depend on the value of the Certificates at the date of sale and that this value could be less than the amount you invested?

☐ Yes ☐ No

Do you understand that if BNP Paribas is unable to pay the amount due when the investment matures, or on earlier encashment, you may lose some or all of your initial investment as well as any future potential return which you might have otherwise expected?

☐ Yes ☐ No

Are your Investment Objectives and Risk Profile consistent with the Target Market described in Section 2.2 of the Brochure?

☐ Yes ☐ No

Do you understand that you will not be entitled to compensation under any Deposit Protection Scheme as a result of your investment in either Bond?

☐ Yes ☐ No

Do you understand the fees and charges described in the Costs and Charges Section 2.8 of the Brochure?

☐ Yes ☐ No

2. Application Amount

I/We wish to invest € in the Broker Solutions 4 Year Eurozone Bonus Builder Bond 11.

(€25,000 minimum investment amount in denominations of €1,000) and if necessary, to open an Omnium or Conexim Account to do so.

You must submit your Application and all supporting documentation to your Financial Broker in full before the Closing Date on 28 October 2026. You may cancel your investment before the Closing Date on 28 October 2026 but your investment may not be cancelled on any date thereafter.

3. Investor Declarations (Please confirm by ticking the boxes)

- ☐ I/We declare that the details above are correct, and that
- ☐ I/We are over 18 and confirm that
- ☐ I/We understand the Key Features and Terms & Conditions of the chosen Bond set out in the relevant KID, Brochure and Base Prospectus.
- ☐ I/We confirm that the Bond chosen is consistent with my/our Investment Objectives and Risk Profile.
- ☐ I/We understand that I/We can lose some or all of the amount invested in any of the Bonds.
- ☐ I/We understand that the investment will not be deemed to have been made until the application has been accepted and that, if and when accepted, the investment will commence on 6 November 2026.
- ☐ Where applicable, I/we confirm that I/we have received a copy of the Omnium or Conexim Account Documentation and that I/We have read and understood this document and its contents.
- ☐ Where applicable, I/we hereby request and authorise you to place my/our Investment Amount in a Client Asset Account in the name of Pershing Securities International Limited.
- ☐ Where applicable, I/we hereby authorise you to transmit to Omnium or Conexim, client information you hold on me.

Primary Signature:

Date:

Secondary Signature:

Date:

Warning: If you invest in any of the Bonds you may lose some or all of the money you invest.

Warning: The value of your investment can go down as 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 investment:

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 purpose of target market identification under MIFID II.

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 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

1. Completed Bond Application Form ☐

Completed by Investor and by the Financial Broker

2. Completed Omnium or Conexim Account Opening Application Form (where applicable) ☐

Completed by Investor and by the Financial Broker

3. Payment ☐

Electronic Funds Transfers (EFTs)

EFTs should not be made until after your Omnium or Conexim Account is opened and/or is fully operational. Your Financial Broker will confirm the Account Details and the Payment Reference that should be used after your application has been processed and accepted.

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.

Please Note that Cheques and Drafts will not be accepted in any circumstances.

4. Personal Investors ☐

Certified Proof of Identity: Certified copy of valid passport or driving license for each Investor ☐

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).

5. Self Administered Pensions Trusts ☐

Certified copy of the Trust Deed ☐

Certified copy of the Revenue Approval Letter ☐

TRUSTEE COMPANY:

Proof of Identity: ☐

- Certified copy of valid Proof of Identity for each Trustee Authorised Signatory signing the Application Form(s)

Proof of Address: ☐

- Certified copy of Proof of Address for each Trustee Authorised Signatory signing the Application Form(s)

Note that 2 Proofs of Address (dated within last 3 months) will be required to open Conexim Investment Platform Accounts.

BENEFICIARY:

Proof of Identity: Certified copy of valid Proof of Identity ☐

Proof of Address: Certified copy of valid Proof of Address ☐

Note that 2 Proofs of Address (dated within last 3 months) will be required to open Conexim Investment Platform Accounts

6. Self Administered ARFs/AMRFs ☐

Certified copy Management Agreement (or other relevant set up document) ☐

TRUSTEE COMPANY:

Proof of Identity: ☐

- Certified copy of valid Proof of Identity for each Trustee Authorised Signatory signing the Application Form(s)

Proof of Address: ☐

- Certified copy of valid Proof of Address for each Trustee Authorised Signatory signing the Application Form(s)

Note that 2 Proofs of Address (dated within last 3 months) will be required to open Conexim Investment Platform Accounts

BENEFICIARY:

Proof of Identity: ☐

Certified copy of valid Proof of Identity

Proof of Address: ☐

Certified copy of valid Proof of Address

Note that 2 Proofs of Address (dated within last 3 months) will be required to open Conexim Investment Platform Accounts

7. Companies ☐

Certified copy of Certificate of Incorporation ☐

Certified copy of Memorandum and Articles of Association ☐

Authorised Signatory List ☐

Proof of Identity: ☐

Certified copy of valid Proof of Identity for each Authorised Signatory signing the Application Form(s)

Proof of Address: ☐

Certified copy of valid Proof of Address for each Authorised Signatory signing the Application Form(s)

Note that 2 Proofs of Address (dated within last 3 months) will be required to open Conexim Investment Platform Accounts.

List of Shareholders ☐

Legal Entity Identifier (LEI) provided on Application Form(s) ☐

8. Insured Pension and Insured ARF/AMRF investors ☐

All documentation and investment instructions submitted to the relevant life company ☐