

Application Form for Trustees, Companies and Partnership (US\$ Investments)



PLEASE COMPLETE THIS FORM USING BLOCK CAPITALS IN BLUE OR BLACK INK

1. Your details

Trust/Company Partnership name:	<input type="text"/>	Type of trust:	<input type="text"/>
Address for correspondence:	<input type="text"/>	(if applicable)	
	<input type="text"/>	Name of administrators:	<input type="text"/>
	<input type="text"/>	(if applicable)	
	<input type="text"/>	Contact name:	<input type="text"/>
	<input type="text"/>	Contact tel no:	<input type="text"/>
Postcode:	<input type="text"/>	Email:	<input type="text"/>

2. Subscriptions

Investment: UK Cheques should be made payable to Meteor Capital Holdings Limited Client Account.

If you send money by telegraphic transfer, the details you require are: IBAN GB09MIDL40051567634428 (Meteor Capital Holdings Limited US\$ Client a/c HSBC Bank plc, P.O. Box 105, 33 Park Row, Leeds LS1 1LD. Sort code: 40-27-15. Account number: 67634428.)

3. Investment details

Please indicate the Plan(s) required and the amount you wish to invest. Please ensure the exact Plan name is entered below.

Name of Meteor Plan(s)	Option (i.e. growth, monthly, annually)	Amount to be invested
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Total investment		\$ <input type="text"/>

Please complete the details below if you have chosen an income option and ensure that they are correct:

Income payments can only be made via the BACS system.

Bank/Building Society:	<input type="text"/>	Account name:	<input type="text"/>
Address:	<input type="text"/>	Account no:	<input type="text"/>
	<input type="text"/>	Sort code:	<input type="text"/>
	<input type="text"/>	Building Society Ref. or Roll no:	<input type="text"/>
Postcode:	<input type="text"/>		<input type="text"/>

4. Authorised signatures

The exercise of any options under the Terms and Conditions of the Plan must be authorised by the requisite number of authorised signatories or, where a number is not stipulated, by at least one authorised signature. Please provide the names and sample signatures of all those who will be Authorised Signatories. If you require more than five, please continue on a separate sheet of paper. Where there is any change to the Authorised Signatories, please notify Meteor Capital Holdings Limited in writing giving the date of the change (Meteor Capital Holdings Limited will be entitled to rely on the previous list until it is informed to the contrary).

Please state number of signatories required (minimum 2):

Signed:	<input type="text"/>	Name:	<input type="text"/>	Date:	<input type="text"/>
Signed:	<input type="text"/>	Name:	<input type="text"/>	Date:	<input type="text"/>
Signed:	<input type="text"/>	Name:	<input type="text"/>	Date:	<input type="text"/>
Signed:	<input type="text"/>	Name:	<input type="text"/>	Date:	<input type="text"/>
Signed:	<input type="text"/>	Name:	<input type="text"/>	Date:	<input type="text"/>

5. Have you received financial advice?

Please indicate below if you have received financial advice relating to the investment.

I have received financial advice from an independent Financial Adviser. Name of firm:

Please read and complete the declaration overleaf...

6. Declaration

1. I/we apply as Trustees/Authorised Parties for the Plan(s) indicated in Part 3 above to be issued on Meteor Capital Holdings Limited standard Terms and Conditions or special Terms and Conditions appropriate to my/our investment. If any amendment to the standard Terms and Conditions shall apply to my/our investment, Meteor Capital Holdings Limited will notify me/us of any such Terms and Conditions before proceeding with the acceptance of the application.
2. I/we confirm that my/our powers of investment, and delegation of those powers, permit me/us to invest the assets of the Scheme, or part of them not less than the part which I/we propose to invest, in the Plan(s) now applied for.
3. I/we understand and agree that any investments in the Plan(s) will be allocated in accordance with my/our instructions to Meteor Capital Holdings Limited (which includes any set out in the 'Investment Details' section of this application).
4. This application and the Terms and Conditions referred to in 1 above shall form the basis of the contract between me/us and Meteor Capital Holdings Limited. I/we acknowledge receipt of the Terms and Conditions, further copies of which are available on request.
5. I/we confirm that the information given in the application, whether in handwriting or not, is true and complete.

I/we have read and understood the relevant Plan(s) Brochure, Key Features and Terms & Conditions and accept the terms under which my/our investment(s) will be managed. I/we declare that this application form has been completed to the best of my/our knowledge and belief. I/we understand that Meteor Capital Holdings Limited does not provide investment advice and confirm that I/we either do not require such advice or have received advice on this investment from an independent Financial Adviser.

For and on behalf of:

Signed:

Name:

Date:

Note: When you have filled in and signed this application form, please return it to your Financial Adviser or to Meteor Capital Holdings Limited, 68 Lombard Street London EC3V 9LJ.

For Financial Adviser's use only

Financial Adviser:

Signed on behalf of the above:

Prevention of money laundering

I/we confirm that I/we have completed the appropriate verification of identity checks and attach the Verification of Identity Certificate*. Certified copies of the underlying documentary evidence are enclosed with this certificate. I/we have sighted the original documents and that any requiring a signature were pre-signed.

FSA number:

* It is necessary to verify the identity of the provider of funds, i.e. the settler, those who have control over the funds, i.e. the trustees and any controllers who have the power to remove the trustees. For discretionary and offshore trusts, the nature and purpose of the trust and original source of funding should be ascertained.

Note: When this application form is completed and signed, please return it to your Financial Adviser or to Meteor Capital Holdings Limited, 68 Lombard Street, London EC3V 9LJ. If mailing from outside the UK, we recommend that you fax a copy of this application to us on +44 20 7868 1707

For Meteor use only

Receipt date:

Broker number:

Plan number: