SECTION 1: INVESTOR INFORMATION

**SURNAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OTHER NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NATIONAL ID NO.: (NIN FOR NIGERIANS): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**INTERNATIONAL PASSPORT NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_COUNTRY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EXPIRY DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ISSUE DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

The investor is the person who subscribes. All shareholder mailings will be sent to the address provided here:

MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. General Information on Investor (mandatory)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Title  | Mr. |  | Mrs. |  | Miss  |  |  |
| Surname |  | First Name(s) |  |
| Date of Birth |  | Minor | Yes |  | No  |  |  |  |
| Place of Birth |  | Country of birth |  |
| Nationality |  | Occupation |  |
| Sector of activity |  | Estimated annual income |  |
| Origin of funds | Saving  |  | Inheritance |  | Sale of real estate |  | Others\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |

Residential Address (please note that “PO Box” and “Care of” are not accepted)

|  |  |  |  |
| --- | --- | --- | --- |
| Street/No./Name |  | House No. |  |
| Postcode/LGA |  | City  |  | Country |  |

Mailing Address (if different from Residential Address)

|  |  |  |  |
| --- | --- | --- | --- |
| Street/No./Name |  | House No. |  |
| Postcode/LGA |  | City  |  | Country |  |

Contact details

|  |  |  |  |
| --- | --- | --- | --- |
| Telephone number |  | Fax number |  |
| Contact person |  | E-mail address |  |

Tax – Benefit to Federal Inland Revenue (FIRS) at 7.5% Investment value

|  |  |  |  |
| --- | --- | --- | --- |
| Tax identification No |  | COT/MGT Fee | 2.5% Investment Value |

Politically Exposed Persons

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Political Mandate (PEPs\*) | Yes |  | No |  |
| If “Yes” | Please detail the mandate |

Reporting (reporting is sent either by mail or by fax)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Reporting language | English |  |  |  |
| Reporting currency (select) | USD |  | EUR |  | GBP |  |
|  | NAIRA |  | YUAN |  |  |
| Reporting by Email | Yes  |  | No  |  | Email address |  |

In case of dividends, payments should be

|  |  |  |  |
| --- | --- | --- | --- |
| Paid to my bank |  | Reinvested  |  |

2. General Information on Joint-holders or guardian (if applicable)

Identification

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title  | Mr. |  | Mrs. |  | Miss  |  | Others  |  |  |
| Surname |  | First Name(s) |
| Date of Birth |  | Minor | Yes |  | No  |  |  |  |
| Place of Birth |  | Country of birth |  |
| Nationality |  | Occupation |  |
| Sector of activity |  | Estimated annual income |  |
| Origin of funds | Saving  |  | Inheritance |  | Sale of real estate |  | Others\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |

Residential Address (please note that “PO Box” and “Care of” are not accepted)

|  |  |  |  |
| --- | --- | --- | --- |
| Street/No./Name |  | House No. |  |
| Postcode/LGA |  | City  |  | Country |  |

Contact details

|  |  |  |  |
| --- | --- | --- | --- |
| Telephone number |  | Fax number |  |
| Contact person |  | E-mail address |  |

Politically Exposed Persons

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Political Mandate (PEPs\*) | Yes |  | No |  |
| If “Yes” | Please detail the mandate |

Please note that in case of joint holders, all applicants will be considered as joint applicants, but individual signatory powers apply. Reporting will be sent to the First Application as defined in the Terms and Conditions.

**Please note that in case of joint register, all applicants will be considered as joint applicants, but individual signatory powers apply.**

3. Investor payment instruction to be used for redemption/dividend payments (mandatory)

|  |  |
| --- | --- |
| Bank Name |  |
| Street/No |  |
| Postcode/LGA |  | City |  | Country  |  |
| BIC/SWIFT code |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| and/or National Bank Code (ex: BLZ, sort code…) |  |
| Account number (IBAN format mandatory when account currency is EUR) |  |
| Account Holder Name |  | Account Currency |  |

Please note that third part payments are not accepted (except if the investor is a minor – in which case, the payment can be made to the guardian).

4. Payment instruction used by the Investor for the subscription

|  |  |
| --- | --- |
| Bank Name |  |
| Street/No |  |
| Postcode/LGA |  | City |  | Country  |  |
| BIC/SWIFT code |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| and/or National Bank Code (ex: BLZ, sort code…) |  |
| Account number (IBAN format mandatory when account currency is EUR) |  |
| Account Holder Name |  | Account Currency |  |

Please note that third part payments are not accepted (except if the investor is a minor – in which case, the payment can be made to the guardian).

5. Please confirm the following:

\* I am investing through an intermediary: section 2, section 3 and section 4 have to be completed.

\* I am not investing through an intermediary: section 3 and section 4 have to be completed.

**SECTION 2: INTERMEDIARY INFORMATION (**mandatory if the investor submits his Application Form through an intermediary)

The intermediary is the financial company through which the investor submits his application form, before sending it to HEDGROMICS INVESTMENTS PLC at Plot 226, Central Business District, Federal Mortgage House, near SAHAD Stores, PMB 49, GPO Garki, Abuja (FCT), Nigeria.

1. General information on intermediary / distributor (mandatory if the investor submits his Application Form through an intermediary)

|  |  |
| --- | --- |
| Intermediary Name |  |

Intermediary Registered Office Address (please note that “PO Box” and “Care of” are not accepted)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Postcode/ LGA |  | City  |  | Country  |  |

Mailing Address (if different from Residential Address)

|  |  |
| --- | --- |
| Street/No./Name |  |
| Postcode/LGA |  | City  |  | Country |  |

Intermediary Contact details

|  |  |  |  |
| --- | --- | --- | --- |
| Telephone number |  | Fax number |  |
| Contact person |  | E-mail address  |  |

Regulation

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Is the intermediary regulated? | Yes |  | No |  |
| If “Yes” | Name of the regulatory body |
| Regulator web site address of the page showing the name of the intermediary |

1. Declaration concerning Know-Your-Client (KYC) controls done by the intermediary (mandatory if investor submits his Application Form through an intermediary)

The intermediary confirms that, to the best of its knowledge and on a best efforts basis, it has given itself the appropriate means and internal procedures to prevent and avoid utilization of the intermediary for purposes of money laundering (i.e. any activity involving the investment, concealment or conversion of the direct or indirect proceeds of criminal activities as listed in Luxemborg law) or terrorism financing, and to detect and intercept money laundering channels or chains.

* We substantiate, on the basis of probative official documents, the true identity of (a) all our clients, both regular and occasional, including investors into funds for which we act as intermediary and for which Hedgromimcs Investments Plc is acting as Transfer Agent, and (b) where our clients are not acting on their own behalf, of economic beneficiaries (i.e. beneficial owners) and (c) the authorized representatives of the clients hereinafter collectively referred to as the “Client”
* We retain register opening and Client identification documentation for a period of at least 5 years after the end of our relationship with the Client,
* Client identification documents shall be promptly made available to Hedgromimcs Investments Plc on their request,
* Our procedures to prevent money laundering include the monitoring of Client transactions, including the monitoring of the source and destination of funds, the review of the purpose and object of the transaction, and, with a risk-based approach, apply enhanced checking procedures to transactions which we identify as unusual in their size, conditions or nature,
* We are aware of the Nigerian security (EFCC/ICPC/NFIU/CBN…) watch lists contained in regulations concerning identification and declaration of business relations with suspected terrorist groups, persons or entities, or country subject to embargo, and we have checked and will monitor that the Client does not appear on such watch lists,
* Our officers and employees comply strictly with all related procedures and controls in place,
* We hereby certify that we (a) are not a *shell bank* within the meaning given to these terms under Nigeria legislation and (b) do not accept *shell banks* as a client,
* We are aware of the terms of the Prospectus of the relevant funds and we shall observe them. In particular, we shall not allow the purchase or holding of units or shares of the Funds by persons not authorized to purchase or hold them under the provisions of the Prospectus,
* We shall not advertise for clients, solicit clients, or sell any of the funds for which Hedgromimcs Investments Plc act as Transfer Agent, unless we may do so in compliance with the laws and regulation applicable in our country or in other countries where such advertising, solicitation, offer or sale takes place including any regulation requiring registration of the Fund with the competent authority.

Please tick hereafter:

|  |  |  |  |
| --- | --- | --- | --- |
| We do comply with all the above declarationThere shall be deemed reiterated at the time of any order placed with Hedgromimcs Investments Plc and shall continue throughout the period of our or our Client’s holdings in the fund. |  | We do not comply with all the above declaration |  |

The intermediary commits to inform Hedgromimcs Investments Plc case it ceased to be regulated.

1. **Signature section (mandatory if investor submits his Application Form through an intermediary)**

|  |  |
| --- | --- |
| Intermediary Signature |  |
| Signatory Name |  |
| Intermediary Stamp |  |

**SECTION 3: FINAL BENEFICIARY INFORMATION**

The final beneficiary of the register is the person (or company) who has the economic benefit of the holdings.

1. **Declaration of final beneficiary (mandatory)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Who has the economic benefit of the register? | The investor |  | Somebody else |  |

Note: If one of the following cases applies to you, there is **no requirement** to complete the section below.

- Your financial intermediary is a company regulated in Nigeria.

- Your financial intermediary has a parent company regulated in Nigeria, which controls the application of KYC laws is its subsidiaries.

**If final beneficiary changes, the investor commits to inform Hedgromimcs Investments Plc of the new beneficial owner(s).**

1. **General information on the final beneficiary (mandatory if the final beneficiary is different from the investor)**

Identification

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title  | Mr. |  | Mrs. |  | Miss  |  | Others |  |  |
| Surname |  | First Name(s) |
| Date of Birth |  | Minor | Yes |  | No  |  |  |  |
| Place of Birth |  | Country of birth |  |
| Nationality |  | Occupation |  |
| Sector of activity |  | Estimated annual income |  |
| Origin of funds | Saving  |  | Inheritance |  | Sale of real estate |  | Others\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |

Residential Address (please note that “PO Box” and “Care of” are not accepted)

|  |  |  |  |
| --- | --- | --- | --- |
| Street/No./Name |  | House No. |  |
| Postcode/LGA |  | City  |  | Country |  |

Contact details

|  |  |  |  |
| --- | --- | --- | --- |
| Telephone number |  | Fax number |  |
| Contact person |  | E-mail address |  |

Politically Exposed Persons

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Political Mandate (PEPs\*) | Yes |  | No |  |
| If “Yes” | Please detail the mandate |

1. **Signature section (mandatory if the final beneficiary is different from the investor)**

|  |  |
| --- | --- |
| Final Beneficiary Signature |  |

SECTION 4: DECLARATIONS AND SIGNATURE OF THE INVESTOR AND JOINT APPLICANTS

1. I/We hereby confirm that money or assets invested by me/us in the fund are neither directly nor indirectly the proceeds of any criminal act within the meaning of applicable Luxemborg law.
2. I/We understand and accept that the application is made on the basis of and subject to the Prospectus and the Articles of Incorporation or Management Regulations of the Fund amended from time to time and that my/our statements, instructions set out in this application form shall apply to such dealings, unless I/we otherwise notify the Fund in writing.
3. I/We declare that we have received and read the latest version of the Prospectus and the latest annual report of the Fund and, as the case may be, the latest semi-annual financial report (as applicable)
4. Where the Fund qualifies as a specialized investment fund within the meaning of the Nigerian law dated CAMA 2020 relating to specialized investment funds (the “2020 law”), I/We acknowledge that Hedgromimcs Investments Plc may require to be provided with additional documents necessary to confirm that I/we am/are eligible investor(s) within the meaning of the CAMA 2020 law. In particular, I/we acknowledge that, if I/we qualify as well-informed investors within the meaning of this article (“Well-Informed Investors”), I/we may be required to return the Certificate for Well-Informed duly completed and executed to Hegromimcs Investments Plc (as attached to this Application Form).
5. I/We declare that I/we are over 18 years of age or in cases of application on behalf of investors under 18 years of age, that I/we comply with the provisions set out in the Terms and Conditions.
6. I/We acknowledge and agree that the applicant(s)’ personal details will be held by Hedgromimcs Investments Plc. I/We acknowledge that this data may be subject to recording and various processing for subscriptions, redemptions and transfers. I/We acknowledge that I/we have a permanent access to such data and the right to request relevant amendments of the data.
7. I/We declare to have read and agree to the Terms and Conditions.
8. I/We hereby declare that the information contained in the Application Form is correct and I/we hereby undertake to inform the Fund of any change in my/our details contained herein.
9. Please note that in case of joint register, all applicants will be considered as joint applicants, but individual signatory powers apply.

|  |  |
| --- | --- |
| Investor Signature (or guardian signature in case of minor) |  |
| Joint Application Signature(s) |  |

|  |  |
| --- | --- |
| Tax Dues: | AUTHORISATION OF EXCHANGE OF INFORMATION/DISCLOSURE |

Consequently, I the undersigned, for the purposes of tax payable to Nigerian Government with FIRS.

Last name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth\_\_\_\_\_\_\_\_ City of birth\_\_\_\_\_\_\_\_\_\_ ID/Passport Details\_\_\_\_\_\_\_\_\_\_ Issue Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tax Identification number\_\_\_\_\_\_\_\_\_\_\_ NIN No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Holder of register(s) no\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In which are recorded my shares in the investment funds for which Hedgromimcs Investments Plc holds the register of registered shareholders.

1. Give express authorization to Hedgromimcs Investments Plc to deduct at source applicable tax for Nigerian Government;
2. This authorization is given to you for an unspecified term. I may however terminate it at any time by simple written notification on my part. This termination will take effect 60 days after you receive it. This authorization is governed by the laws of Nigeria dispute related to interpretation, validity, or execution hereof shall be subject to the exclusive jurisdiction of the courts of the judicial district of Nigeria.

|  |  |  |  |
| --- | --- | --- | --- |
| Place |  | Date  |  |
| Investor Signature |  |

1. For corporate/company investors, the Board’s authorized regulation, signatures, certified TRUE COPY, date and ORIGINAL STAMP of certifying entity MUST BE ATTACHED TO THE COMPLETED FORM WITH BOLD INSCRIPTION “CORPORATE INVESTOR”. TIN (FIRS) stated.

10. Certificate for “Well-Informed Investors”

 I/We hereby certify on honour that I/We am/are well-informed Investor(s).

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signed