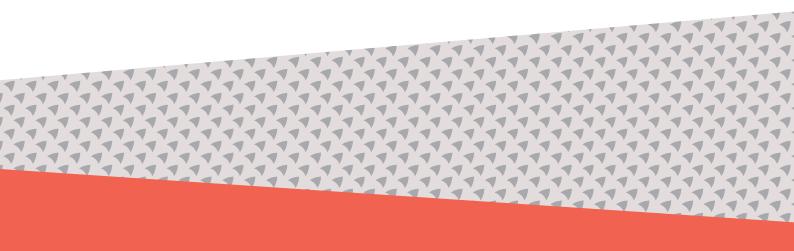
BCP

THE

BCP/HSBC CREDIT UNION 7 DAY NOTICE DEPOSIT APPLICATION FORM



APPLICATION FORM

This application form is for Credit Unions use only.

WE HEREBY APPLY FOR THE BCP / HSBC CREDIT UNION 7 DA	Y NOTICE DEPOSIT AS FOLLOWS:	
PLEASE COMPLETE IN BLOCK CAPITALS		
Investment advice was provided by:		
Retained Advisor (Firm Name)	_ Intermediary	
Name of Applicant:		
Address to which any correspondence to be sent:		
Central Bank Registered CU Number:		
Contact Person:	Telephone:	
Email: (Required)		
Source of Funds: New investment from existing funds Reinvestment from	BCP product Encashment of another product	
Payment by: Cheque: Bank Draft: EFT:		
For payment by Bank Draft and EFT please provide source of fu	unds details below:	
Bank/Building Society/Credit Union Name:		
Account Name:	Account Number:	
Sort Code:	IBAN:	
INVESTMENT AMOUNT		
BCP / HSBC Credit Union 7 Day Notice Deposit (in Euro) The minimum initial investment amount is €500,000, for subsequences.	uent investments the minimum investment amount is €100,000.	
BCP Electronic Funds Transfer (EFT) Details: Bank Name: HSBC Continental Europe, Ireland Bank Address:	1 Grand Canal Square, Grand Canal Harbour, Dublin 2, DO2 P820	
Account Number: 37003680		
Account Name: BCP ASSET MANAGEMENT DESIGNATED ACTIVITY	COMPANY Sort Code: 99-02-31	
BIC Code: HSBCIE2D	IBAN No.: IE49 HSBC 9902 3137 0036 80	
BANK DETAILS FOR PAYMENTS		
In order to pay maturity/income/interest proceeds please pro Please note that maturity/income/interest proceeds can only		
Account Name:	IBAN No.:	
Bank/Credit Union/Building Society Name:		
Bank Address:		

DECLARATION

I/We understand the Terms and Conditions as set out in the Brochure including the local in France) and agree to be bound by them.	ition of the counterparty (which is regulated		
I/We hereby request and authorise BCP to give effect to any written request, direction or instruction relating to the BCP / HSBC Credit Union 7 Day Notice Deposit on the signature(s) of me/us.			
I/We acknowledge that any deposit interest earned prior to the Investment Date or afte be retained by BCP, as will any deposit interest earned which is payable to BCP for servi Investment as set out in Brochure.			
I/We declare that this authorisation, unless terminated by dissolution, or by operation of law, shall remain in full force and effect until the end of the Term.			
I/We acknowledge that I/we have read, understand and accept BCP Asset Management DAC's Terms of Business.			
I/We confirm I/we have received the BCP Client Asset Key Information Document.			
I/We acknowledge that all client assets held by BCP are held in an omnibus client asset account in the name of BCP.			
I/We authorise my/our advisor to view details of my/our account online.			
I/We agree to receive valuations and other communications from BCP online via vespro.bcp.ie			
I/We represent and warrant that the Credit Union is investing as principal and in full compliance with the Credit Union Act 1997 (Regulatory Requirements) Regulations 2016 – S.I. No. 1 of 2016 including in particular Part 5 of those regulations and in accordance with the investment strategy of the Credit Union.			
I/We confirm that where we have provided personal data in respect of an officer, direct consent for providing this information to BCP.	or or employee I/we have obtained their		
I/We confirm that there is no beneficial owner with a 25%+ interest in the Credit Union.			
POLITICALLY EXPOSED PERSON (PEP), RELATIVE OR CLOSE ASSOCIATE (RCA) OF A PEP AND OTHER PERSONS OF INFLUENCE			
I/we confirm that no current Director is (or has been), a PEP or RCA of a PEP.	YES NO		
I/we confirm that no current Director holds (or has held) a prominent position or enjoys a high public profile.	(or has enjoyed) YES NO		
I/we confirm that no current Director is involved (or has been) in political lobbying.	YES NO		
If you have answered 'No' to any one of the above, please complete the PEP, RCA and Other Persons of Influence Supplementary Form (available on the BCP website or upon request).			
SIGNED (TWO AUTHORISED SIGNATORIES MUST SIGN AS PER MANDATE BELOW):			
SIGNATURE (A): on behalf of the Applicant	Date:		
SIGNATURE (B): on behalf of the Applicant	Date:		
Email address for <u>vespro.bcp.ie</u> registration: (Required)			
New & Existing Clients			

Warning: The interest rate may increase or decrease and is based on the European Central Bank Deposit Facility Rate.
Warning: If HSBC Continental Europe were to default, you could lose some or all of your investment and potential interest. Warning: Your investment is not covered by any Deposit Guarantee Scheme.

Confirmation of identity must be provided in accordance with Section 2 of the Terms and Conditions.

MANDATE FOR THE INVESTMENT

At a meeting of the Directors duly convened	d and held on the	day of
		2025 the following resolution was passed.
"Resolved that (insert applicant name):		should
invest; (in Euro);	in the BCP / HSBC Credit Union 7	Day Notice Deposit and the following are
authorised to complete, on behalf of the co	mpany, the application forms and other doo	cumentation relating to this investment."
SPECIMEN SIGNATURES OF THOSE AUT	HORISED TO GIVE INSTRUCTIONS (MININ	MUM 2 SIGNATORIES ARE REQUIRED)
NAME	OFFICIAL POSITION	SIGNATURE
I CERTIFY THE ABOVE TO BE A TRUE COP	Y OF THE RESOLUTION RECORDED IN TH	E MINUTE BOOK
SIGNATURE: (Authorised Signatory)		
Print Name (Director/Secretary') (Delete as app	propriate):	
Date:		
* Mandatory		