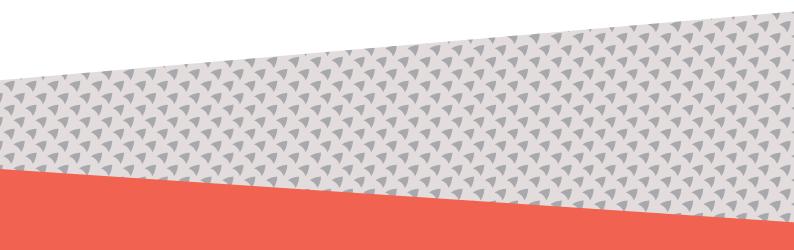
BCP

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 Day Notice Deposit as follows:		
PLEASE COMPLETE IN BLOCK CAPITALS		
Investment advice was provided by:		
Retained Advisor	(Firm Name) Intermediary BCP No advice received	
Name of Applicant:		
Address to which any correspondence to be	sent:	
Central Bank Registered CU Number:		
Contact Person:	Telephone:	
	Текерпопе.	
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 p	rovide source of funds details below:	
Bank/Building Society/Credit Union Name:		
Account Name:	Account Number:	
Sort Code:	IBAN:	
INVESTMENT AMOUNT		
BCP / HSBC Credit Union 7 Day Notice Depose The minimum initial investment amount is €50	sit € 0,000, for subsequent 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 DES	SIGNATED ACTIVITY COMPANY Sort Code: 99-02-31	
BIC Code: HSBCIE2D	IBAN No.: IE49 HSBC 9902 3137 0036 80	
BANK DETAILS FOR PAYMENTS		
	oceeds please provide the relevant bank account details for you. proceeds can only be paid to an account in your name.	
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 location of the counterparty (which is regulated in France) and agree to be bound by them.

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 after Maturity Date/Withdrawal Date will be retained by BCP, as will any deposit interest earned which is payable to BCP for services provided during the term of the 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, director or employee I/we have obtained their consent for providing this information to BCP.

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 (or has enjoyed)

a high public profile.

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):

I/we confirm that no current Director is involved (or has been) in political lobbying.

SIGNATURE (A): Date: on behalf of the Applicant

SIGNATURE (B): Date: on behalf of the Applicant

Email address for vespro.bcp.ie registration: (Required)

New & Existing Clients

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

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.

MANDATE FOR THE INVESTMENT

At a meeting of the Directors duly convened and held on the		day of
		2024 the following resolution was passed.
"Resolved that (insert applicant name):		should
invest; €	$_{\scriptscriptstyle \perp}$ in the BCP / HSBC Credit Union 7 Day No	otice Deposit and the following are authorised
to complete, on behalf of the company, the	e application forms and other documenta	tion relating to this investment."
Specimen signatures of those authoris	ed to give instructions (Minimum 2 sign	atories are required)
NAME	OFFICIAL POSITION	SIGNATURE
I certify the above to be a true copy of	the Resolution recorded in the minute b	oook
SIGNATURE: (Authorised Signatory)		
Print Name:		Director/Secretary* (Delete as appropriate)
Date:		
* Mandatory		