Pension Application

Who is this application form for?

Other application forms are available to download from **www.mbstructuredinvestments.com**

✓ Pensions (SIPP or SSAS)

✗ General Investment for Individual/Joint Customers
✗ ISA Investment customers
✗ General Investment on behalf of a child under 18
✗ Trusts/Charities
✗ Companies/Partnerships

How are you applying?

Tick all that apply.

☐ **I am an existing customer**
Complete Sections A, C, D, E, F, G

☐ **I am a new customer**
Complete Sections B, C, D, E, F, G

☐ **I am applying with a professional financial adviser providing advice**
You should answer all questions in Section E
Your financial adviser should complete Section F

☐ **I am applying execution-only via a professional financial adviser**
You should answer all questions in Section E
Your financial adviser should complete Section F

☐ **I am applying directly without a professional financial adviser**
You should answer all questions in Section E

If you have not received advice, please provide a certified copy of a recent bank statement.

How will you send your application form?

Tick one.

☐ **via my professional financial adviser**
Contact your financial adviser for details

☐ **via email**
adminteam@meteoram.com

☐ **via post**
Meteor Asset Management Limited,
24/25 The Shard,
32 London Bridge Street,
London, SE1 9SG

Apply online by clicking 'Apply Online' on the relevant plan page on our website.

Our plans are also available on many **investment platforms.**

For more information go to **www.mbstructuredinvestments.com**

How will you send your funds?

Tick all that apply. Please ensure your application form and funds get to Meteor by the deadlines.

☐ **Bank Transfer (Preferred) by 21 December 2026**
Meteor Investment Management Limited Client Account
HSBC Bank plc
Sort Code: 40-05-30
Account Number: 13692752
IBAN: GB21MIDL40053013692752
Reference: Your full name and/or MB Structured Investments account number

☐ **Cheque by 21 December 2026**
Payable to 'Meteor Investment Management Limited Client Account'

Meteor strongly discourages payment by cheque as it can increase the risk of your application being delayed and incurring additional charges.

You may be charged a fee of £40 +VAT for unpaid cheques.

☐ **Reinvestment of a matured plan**
Your funds are already with Meteor

Additional Information

Please provide any further information that may be useful for this application. This may include more complex fee structures, payment methods, power of attorney (POA document required) etc.

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Section A | Existing Customers

Complete this section if you have an existing pension account and your personal details haven't changed

Existing Account Number | Scheme Name | Scheme Reference

Beneficiary Details

Surname | *Date of Birth* | *National Insurance Number*

Important Information

- Meteor may need to contact you for more information if they are unable to verify your application.
- If any of your personal information has changed, please enter the new information in Section B. Otherwise, continue to Section C.

Section B | Customer Details (1/2)

New customers must complete this section in full.

Pension Type | Scheme Name | Scheme Reference

SIPP, SSAS or other

Proposers (Trustees) | Administrator's Name | Legal Entity Identifier

Contact Name | Telephone/Mobile | Email | Telephone Password

Permanent Address

Street Address | *Address Line 2*

Town/City | *County* | *Postcode*

Important Information

- Beneficiary and Trustee information is captured in part 2 of Section B.

Authorised Signatories

Authorised Signatory

Full Name | *Signed* | *Date*

Authorised Signatory

Full Name | *Signed* | *Date*

Authorised Signatory

Full Name | *Signed* | *Date*

Important Information

- The exercise of any options under the Terms and Conditions 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. Where there is any change to the Authorised Signatories, please notify Meteor in writing giving the date of the change (Meteor will be entitled to rely on the previous list until it is informed otherwise).
- Please list any additional individuals on a separate sheet.

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Section B | Customer Details (2/2)

New customers must complete this section in full for every beneficiary and trustee

❶ Beneficiary

Title | Forename(s) | Surname | Date of Birth

National Insurance Number | Country of Birth | Nationality | Email | Telephone/Mobile

Occupation | Industry | UK Tax Resident? ☐ Yes | US Citizen? ☐ Yes | Non-UK Tax Resident?

If retired, provide former occupation and industry | *US citizens will be rejected* | *Country* | *Tax Identification Number (TIN)*

Permanent Address

Street Address | *Address Line 2*

Town/City | *County* | *Postcode*

❷ Beneficiary

Title | Forename(s) | Surname | Date of Birth

National Insurance Number | Country of Birth | Nationality | Email | Telephone/Mobile

Occupation | Industry | UK Tax Resident? ☐ Yes | US Citizen? ☐ Yes | Non-UK Tax Resident?

If retired, provide former occupation and industry | *US citizens will be rejected* | *Country* | *Tax Identification Number (TIN)*

Permanent Address

Street Address | *Address Line 2*

Town/City | *County* | *Postcode*

① Trustee

Title | Forename(s) | Surname | Date of Birth

Country of Birth | Nationality

Permanent Address

Street Address | *Address Line 2*

Town/City | *County* | *Postcode*

② Trustee

Title | Forename(s) | Surname | Date of Birth

Country of Birth | Nationality

Permanent Address

Street Address | *Address Line 2*

Town/City | *County* | *Postcode*

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Section C | Bank Details

Required for income/interest plans or withdrawing money when a plan ends.

Bank/Building Society

Account Holder

Sort Code

Account Number

Reference/Roll Number

Important Information

- Bank details must be in your own name.

Section D | Investment

You are applying for the **UK 5Y Monthly Fixed Income (65) December 2026 | BA11128**. See front page for payment details and deadlines.

Please indicate the total amounts to be sent for this application. Complete all that apply.

£ *via Bank Transfer* + £ *via Cheque* + £ *via Reinvestment* = £ *Total to be funded*

Where do the funds for this investment originate from?

☐ Savings ☐ Property sale ☐ Pension ☐ Transfer ☐ Employment ☐ Inheritance ☐ Other

If using a financial adviser, please state how adviser charges should be deducted. Select One:

☐ Deduct as stated below ☐ Deducted separately (for info only) ☐ No adviser charges deducted

New and Existing Customer | New Investments

Complete all fields that apply. Minimum investment £5,000. Adviser charges will be deducted from the amounts below.

General Investment

£ *Amount* − £ or % *Adviser charge to deduct* = £ *Investment*

Existing Customer | Maturity Options

For existing customers wishing to make a decision on a recently matured plan.

Maturing Account

Account Number

£ *Estimated Maturity Proceeds*

Reinvestment

£ *Amount* − £ or % *Adviser charge to deduct* = £ *Net Reinvestment*

Retain

£ *Pending instruction*

Withdraw

£ *To bank details provided*

Important Information

- Adviser charges will be deducted from the gross amounts that we receive. For complicated charges please inform us using the Additional Information field on the front page.

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Section E | Financial Understanding

❶❷①② All Beneficiaries and Trustees

All customers over 18 must answer the following questions.

To help us maximise the likelihood of you investing in something that meets your investment objectives, it is essential that you appreciate how the plan works and the risks involved. The following questions are designed to assess whether you are now able to make an informed investment decision after having read the relevant documentation.

If your answers suggest that this is not the case, we may request that you speak to your professional financial adviser for clarification or seek one if you have not obtained advice already. All questions are required to be answered.

YES	NO	
☐	☐	Do you have any financial industry experience?
☐	☐	Have you invested in structured products and/or deposits within the past 5 years?
☐	☐	Have you previously invested in any structured products and/or deposits similar to this plan?
☐	☐	Do you feel that you have sufficient understanding of structured products and/or deposits?
☐	☐	Do you feel that you have sufficient understanding of the specific plan that you are investing into?
☐	☐	Do you understand how Market Risk potentially impacts this plan?
☐	☐	Do you understand that the performance of financial markets impacts how much and when this plan pays money?
☐	☐	Do you understand that the ongoing value of the plan can go up as well as down?
☐	☐	Do you understand how Counterparty Risk potentially impacts this plan?
☐	☐	Are you prepared to hold this investment for the full term of the plan?
☐	☐	Do you understand that if you decided to withdraw from the plan early, you could receive less than what you initially invested?

If you answered 'No' to any of the questions above, this plan may not be appropriate for you. Do you still want to proceed?

☐ Yes, I understand the plan and the risks involved. I would like to proceed and I will strongly consider seeking financial advice, if applicable.

Additional Support

Are there any personal circumstances you would like to make us aware of to enable us to better support you?

☐ Yes (Describe below) *You may benefit from extra support*

☐ No *There is nothing to disclose*

If Yes, please describe your personal circumstances

Important Information

- Please note, Meteor does not provide tailored advice on customers' specific needs, or if they fall within the target market.
- If you are investing via a professional financial adviser, they are required to complete Section F.
- If you are not investing via a professional financial adviser, continue to Section G.

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Section F | Financial Adviser Details

If no financial adviser is involved, you do not have to complete this section. Your financial adviser should complete this section.

Company Details

Firm Name	*Branch (if applicable)*	*Financial Services Register Number*

Did you provide professional financial advice in relation to this application?

☐ Yes — *This is an advised sale and I have conducted a suitability assessment*

☐ No — *This is a non-advised sale with appropriateness assessment only*

Have you assessed the customer(s) as falling within the Target Market for which the plan has been designed?

☐ Yes — *They are within the Target Market*

☐ No (Describe below) — *They are outside the Target Market*

If No, please describe below

Are there any personal circumstances we should be made aware of to enable us to better support the customer(s)?

☐ Yes (Describe below) — *They may benefit from extra support*

☐ No — *There is nothing to disclose*

If Yes, please describe below

In submitting this application on behalf of the customer(s), the financial adviser declares that:

- they have met the customer(s), face-to-face, and confirm based on review of their ID documents that they are the individual(s) stated in the application form.
- they confirm that they have carried out the appropriate identity checks on all parties, in line with the requirements set out in the money laundering regulations, relevant to this application and have retained copies of the completed Identity and address Verification documentation, which they understand Meteor may request at any time and may rely on.
- they have seen all original documents and those requiring a signature have been signed.
- they acknowledge that we may request and rely upon this information, and they agree that any request will be fulfilled within two days.
- they acknowledge that, where we consider we have not been able to satisfy all necessary obligations, we may decide not to proceed with the application.
- they acknowledge their responsibility to evaluate all available information on the plan and confirm that where they have given advice, they have the necessary knowledge and experience to be deemed competent to the circumstances and investment objectives of the customer(s). Where advice was not given, they have assessed the plan to be appropriate for the customer(s) circumstances and investment objectives.
- they have provided the investor with the relevant plan documentation including the brochure and, where applicable, the Key Information Document, the Terms and Conditions and the Counterparty's Offering Documentation.
- they will inform Meteor of any material changes to the status of the customer(s) that could impact the product and service the customer(s) receive. This includes but is not limited to, changes to personal and contact details, customer categorisation, specific circumstances and citizenship.
- this application has been completed to the best of their knowledge and belief and they have agreed any adviser charge with the customer(s).
- they have taken action to understand any personal circumstances that may give rise to specific support required by the customer(s).
- consent has been given by the customer(s) to share any sensitive information that has been provided.

By signing below, the Financial Adviser agrees to the declarations above

Financial Adviser

Full Name	*Email*	*Signed*	*Date*

Important Information

- To enable us to comply with money laundering and terrorist financing regulations, we need to verify the identity of customers.
- Please note, investment advice is required for some of our plans. Please refer to the plan documentation for more information.
- A signed Terms of Business agreement is required to facilitate adviser charges.
- Adviser charges will be deducted from the gross total of funds received. Any other arrangements should be outlined in Additional Information.

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Section G | Customer Declaration

The customer declares that they:

- are 18 years of age or older.
- have carefully read the relevant brochure and associated documents fully, including, where applicable, the Key Information Document, the Terms and Conditions and the Counterparty's Offering Documentation.
- agree that Meteor will hold personal and financial information on them for the purposes set out in the Terms and Conditions only.
- have read and accept the terms under which the plan will be managed and the mode of providing them with information concerning the plan.
- have completed this form to the best of their knowledge and belief and the information given in the application, whether in handwriting or not, is true and complete.
- are not, or acting on the behalf of, a resident of the United States and that they will not assist any person who is so resident.
- agree to inform Meteor immediately should they become resident of the United States.
- agree to inform Meteor immediately should there be any change in their residency for tax purposes.
- will inform Meteor without delay of any change in their personal details affecting any of the information in this form.
- will notify Meteor as soon as reasonably possible if their personal circumstances change.
- understood and agreed the amount of any adviser charge indicated in this form and note that the agreed terms will be confirmed by Meteor on acceptance of such instruction.

The customer authorises Meteor:

- to purchase, hold and administer the plan on their behalf in accordance with the Terms and Conditions of the plan.
- to accept instructions from and to release any information in relation to their investment in the plan to their professional financial adviser.
- hold their cash subscription, General investments, ISA investments, interest, dividends and other rights or proceeds in respect of those investments and any cash or other proceeds.
- to make on their behalf, any claims to relief from tax in respect of ISA investments.

The customer understands that:

- Meteor does not provide financial advice and confirm that they either do not require such advice or have received advice on this investment from a professional financial adviser.
- if they have not received professional financial advice for a plan which requires them to take advice, Meteor will be unable to process their application.
- if they have received professional financial advice, they confirm their professional financial adviser is not acting as agent to the Counterparty or its affiliates.

The customer will provide, if required:

- trust documentation

By signing below, the customer agrees to the above declarations

Authorised Signatory

Full Name	*Signed*	*Date*

Authorised Signatory

Full Name	*Signed*	*Date*

Important Information

- Customers over 18 must review and accept the declaration above.
- Ensure any additional forms have been downloaded, completed and included with this application before sending it to us.
- If your personal details or circumstances change, please notify us immediately so we can update our records and ensure you continue to receive the best possible service and support from us.