



### Fund Company(ies) to be Re-registered (continued)

<input type="checkbox"/> Midas Capital	<input type="checkbox"/> New Star (ex Edinburgh Portfolio)	<input type="checkbox"/> PSigma	<input type="checkbox"/> Skandia Investment Management
<input type="checkbox"/> MLC	<input type="checkbox"/> Newton	<input type="checkbox"/> Rathbone	<input type="checkbox"/> Societe Generale
<input type="checkbox"/> Morgan Stanley	<input type="checkbox"/> Norwich Union	<input type="checkbox"/> Rensburg	<input type="checkbox"/> SVM
<input type="checkbox"/> Neptune	<input type="checkbox"/> Old Mutual	<input type="checkbox"/> Resolution Asset Management	<input type="checkbox"/> T. Bailey
<input type="checkbox"/> New Star	<input type="checkbox"/> Old Mutual (ex OM Gerrard)	<input type="checkbox"/> Royal London	<input type="checkbox"/> Thames River Multi-Capital LLP
<input type="checkbox"/> New Star (ex Aberdeen)	<input type="checkbox"/> pH Investment Portfolio	<input type="checkbox"/> Schroders	<input type="checkbox"/> Threadneedle
<input type="checkbox"/> New Star (ex Edinburgh)	<input type="checkbox"/> Premier	<input type="checkbox"/> Scottish Widows Investment Partnership	<input type="checkbox"/> UBS

#### Income Option?

If you have holdings invested within an Income fund the income will be automatically re-invested unless you complete your bank details in Section 4 and mark an X in the relevant box on the Letter of Authority.

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#### Mandate Details - Income

I authorise Fidelity International to make income payments arising from my holdings by direct credit transfer to the bank/building society account detailed below. This section **MUST** be completed if you opt to have income paid out.

NAME(S) OF ACCOUNT HOLDER(S) — THIRD PARTIES ARE NOT ACCEPTED

BANK/BUILDING SOCIETY ACCOUNT NUMBER

BRANCH SORT CODE

BUILDING SOCIETY COLLECTION ACCOUNT NUMBER (IF APPLICABLE) \*

\* Building Society accounts — the sort code and building society collection account number can be obtained from your Building Society branch. Please ensure your that Building Society account will accept direct credit payments through the Banks Automated Clearing system. Fidelity does not accept instructions for payments to be made to an account other than the client's own personal account. If the account number and sort code are incorrect, Fidelity will not accept responsibility for any loss incurred by the applicant.

NAME AND ADDRESS OF BANK OR BUILDING SOCIETY

  



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#### Declaration & Signature

I/We understand that the information I/we provide on this application form will be processed in accordance with Fidelity's data protection statement contained in the Key Features Document/Simplified Prospectus and Terms referred to below. By signing below, I/we confirm that I/we have received the relevant Key Features Document/Simplified Prospectus relating to this investment, and Terms which I/we accept. I/We declare that:

- All subscriptions made, and to be made, belong to me/us, and that I am/we are 18 years of age or over.
- The information given by me/us is correct to the best of my/our knowledge, and I/we will inform Fidelity immediately of any changes to the information contained therein.

A summary of Fidelity's Best Execution Policy can be found at Appendix 1 to the Fidelity Client terms. By your signature below you will be taken to have given your consent to the Best Execution policy, and, where appropriate, your prior express consent to our executing orders outside a regulated market or multilateral trading facility (within the meaning of the FSA rules).

SIGNATURE(S) OF ALL APPLICANTS AND DATE (YOU MUST SIGN HERE - Please ensure all relevant sections are completed as per the instructions on this form)

If you are signing the application form by Power of Attorney, please call Fidelity for the details of documentation that is required for this to be acceptable.

You must provide a SIGNATURE for EACH ACCOUNT HOLDER

PRIMARY ACCOUNT SIGNATURE	<input checked="" type="checkbox"/>	<input type="text"/>	PRIMARY ACCOUNT PRINT NAME	<input checked="" type="checkbox"/>	<input type="text"/>
SECOND ACCOUNT SIGNATURE	<input checked="" type="checkbox"/>	<input type="text"/>	SECOND ACCOUNT PRINT NAME	<input checked="" type="checkbox"/>	<input type="text"/>
THIRD ACCOUNT SIGNATURE	<input checked="" type="checkbox"/>	<input type="text"/>	THIRD ACCOUNT PRINT NAME	<input checked="" type="checkbox"/>	<input type="text"/>
FOURTH ACCOUNT SIGNATURE	<input checked="" type="checkbox"/>	<input type="text"/>	FOURTH ACCOUNT PRINT NAME	<input checked="" type="checkbox"/>	<input type="text"/>

NOTE: For applications with joint holders the Joint Holder Supplement form must also be completed and returned with this application form.

Please mark an X in the box if you have not received advice from an Intermediary regarding this investment.

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#### Intermediary Details

This section should only be completed by Intermediaries. Please enter the appropriate details here and avoid supplying information on separate sheets.

INTERMEDIARY STAMP

UNIQUE ADVISER NUMBER

FSA FIRM REF NO.

I confirm that I am registered with the FSA to conduct business and my authorisation number is:

OFFICE USE ONLY