

Application Form

General Information

Before completing the Application Form, please read the Prospectus including the Terms and Conditions of Application and the Notes on how to complete the Application Form, which are available in the Offer Document section at www.bscfunds.com.

Please complete the form in full, leaving blank any questions that do not apply to you.

The Companies, the Receiving Agent, the Registrar, RAM Capital and YFM cannot accept responsibility if any details provided by you are incorrect.

HM Revenue & Customs may inspect this Application Form. It is a serious offence to make a false declaration.

If you are a nominee applying on behalf of a block of investors, please do not use this form. Instead, please contact the Receiving Agent for alternative instructions.

If you have any questions on how to complete the Application Form, please contact YFM (details below) in the first instance or call City on 01484 240 910. Lines are open between 9.00 am - 5.30 pm, Monday to Friday excluding public holidays. Alternatively, please speak to your Financial Adviser.

Tracey Nice

Investor Relations Support Manager

T: 0113 261 6478 or 07500 330986

E: tracey.nice@ymep.com

W: bscfunds.com

5th Floor, Valiant Building
14 South Parade
Leeds
LS1 5QS

PLEASE DO NOT POST COMPLETED APPLICATION FORMS TO THIS ADDRESS



The closing date for the Offers will be 1 April 2022 (unless fully subscribed earlier).

You may complete and submit your Application online via www.bscfunds.com.

Alternatively, you may complete and send your Application via email to bscfunds@city.uk.com or via post/hand delivery to:

BSC & BSC2 Offers

The City Partnership (UK) Ltd
The Mending Rooms
Park Valley Mills
Meltham Road
Huddersfield
HD4 7BH

If you scan and send your Application Form to the Receiving Agent via email, please **do not** send a copy in the post.

The Companies recommend that you use first class recorded mail and allow at least two working days for delivery. Applications submitted (in particular with a cheque) should allow at least three working days from date of receipt for funds to clear.

APPLICATION FORM

Section 1. Applicant Details

Title:	Forename(s)		
Surname:			
Date of Birth:		National Insurance Number:	
Telephone Number Should we need to contact you regarding your Application, we would like to do so by telephone. Please provide your telephone number below. We also ask that you use this telephone number as part of your Application payment reference.			
Telephone Number:			
Email Address Regarding this Application, the Receiving Agent would like to issue, via email, an acknowledgement of receipt, a confirmation of receipt of monies and, if the Companies accept your Application, a confirmation of allotment and an income tax relief certificate. If you would like to receive email correspondence from the Receiving Agent, please provide your email address below. Alternatively, the Receiving Agent will send the relevant correspondence to you in the post.			
Email:			
For Applications accepted under the Offers, the Companies' Registrar will send the associated share certificates in the post (if applicable).			
Current Address			
Address 1:		City:	
Address 2:		County:	
Address 3:		Postcode:	
For anti-money laundering purposes, if you have lived at your current address for less than three years, please provide your previous address below:			
Address 1:		City:	
Address 2:		County:	
Address 3:		Postcode:	

APPLICATION FORM

Section 1. Applicant Details (continued)

Non-UK tax residency details

Please list below any country(ies), other than the UK, in which you are resident for tax purposes and the relevant Taxpayer Identification Number (TIN).

Country:	TIN/Equivalent:
Country:	TIN/Equivalent:
Country:	TIN/Equivalent:

The Companies may, if necessary, disclose information to HMRC and the IRS to satisfy its FATCA and/or CRS obligations.

Existing Shareholder

If you are an existing Shareholder in the Companies (either or both), please provide the associated IVC code(s) below:

BSC IVC Code:	BSC2 IVC Code:
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If your existing Shares are held by a nominee (CREST or otherwise), please provide the following details as applicable:

CREST Participant ID:	CREST Member Account ID:
Nominee Name:	

APPLICATION FORM

Section 2: Financial Intermediary

Please indicate if a financial Intermediary firm is associated with your Application Form:

Yes, the financial Intermediary firm detailed in Section 8 is associated with my Application Form.

No, a financial Intermediary firm is **NOT** associated with my Application Form. I am a direct Investor.

Section 3: Application Amount

The minimum total Application Amount per investor is £6,000 (**including** any initial Adviser Charge to be facilitated) in either or both Companies.

Income tax relief is available on the total Application Amount (i.e., **including** any initial Adviser Charge to be facilitated).

I hereby offer to invest the following total Application Amount (that **includes** any initial Adviser Charge as set out in Section 9) in pounds sterling for New Shares at the Offer Price on the Terms and Conditions of the Offer.

Tax Year 2021/22

Total Application Amount

£

In the boxes below, please confirm how you wish your Application Amount to be split between the BSC Offer and the BSC2 Offer. If you do not wish to invest in one of the Companies, please enter "0" in the associated box.

BSC Offer

BSC2 Offer

Allocation Split (%)

If you do not state a preference, your Application will be allocated 60 per cent to BSC and 40 per cent to BSC2.

Reallocation/Return Instructions

If an Offer for which you have applied has closed, or is deemed closed, at the time your Application Form is processed, please confirm your reallocation/return preference below:

(i) Please reallocate the amount in respect of the closed Offer to the other Offer irrespective of whether I have applied for that other Offer.

(ii) Please return the amount in respect of the closed Offer to me.

Please note that if you fail to tick a box above, or tick both boxes, your Application monies in respect of the closed Offer will be returned to you.

APPLICATION FORM

Section 4: Shareholding Preferences

Communications

The Companies would like to communicate with you electronically in respect of your shareholding in the Companies. This means that you will receive either (i) notifications by email or (ii) notifications by letter notifying you that information and/or documents are available on the Companies' website and how they can be accessed or (iii) hard copy documents by post.

Please note that if you are an existing Shareholder, for any New Shares in which your Application is accepted under the Offers and allotted to your existing holding(s), your selection will apply to your total shareholding in the Companies.

Regarding any New Shares for which your Application is accepted, how would you like the Companies to communicate with you?

Notifications by email to the email address provided in Section 1

Notifications by letter to the address provided in Section 1

Hard copy documents by post to the address provided in Section 1

You have the right to opt out of electronic communication at any time and to revert to paper format by contacting Tracey Nice whose contact details are on the front of this Application Form.

If you do not confirm a communications preference above and you are a registered holder of New Shares, the Companies will send notifications to you by post to the address in Section 1.

Nominees

If you wish for any New Shares for which your Application is accepted to be allotted to your nominee, please provide the relevant details below:

CREST Participant ID:	CREST Member Account ID:
Nominee Name:	
Nominee Contact Name:	Nominee Contact Telephone Number:
Nominee Contact Email Address:	
Address 1:	City:
Address 2:	Country:
Address 3:	Postcode:

APPLICATION FORM

Section 5: Dividends

If you wish that any New Shares for which your Application is accepted are issued to your nominee, please do **NOT** complete this section. Please contact your nominee regarding your dividend options.

Payment preference

For any dividends that may from time to time become due on any New Shares which stand in your name on the Companies' registers, please confirm your payment preference.

Please note that if you are an existing Shareholder, for any New Shares in which your Application is accepted under the Offers and allotted to your existing holding(s), your selection will apply to your total shareholding in the Companies.

I wish to participate in the dividend reinvestment scheme, and I hereby accept its terms and conditions as detailed on the website www.bscfunds.com

I wish to receive cash dividends paid directly to my bank account detailed below

Dividend bank mandate

If you wish to receive cash dividends paid directly to your bank account, please provide the details of your bank account below. The bank account should be held at a UK regulated credit institution and in your name (sole or joint).

Account in name of:

Sort Code:

Account Number:

APPLICATION FORM

Section 6: Payment

With reference to the following details, please **tick (A) or (B)** below:

Applications will not (unless otherwise agreed by the Companies) be regarded as valid unless cleared funds are received in respect of the Application. Applications with cleared funds will be given priority.

(A) Bank Transfer

I will pay by electronic bank transfer in pounds sterling from a bank account held at a UK regulated credit institution in my own or joint name(s), **which I have referenced using my initials and telephone number (alphanumeric, no spaces) provided in Section 1.**

The bank account to which you should remit the total Application Amount (incl. any initial Adviser Charges for facilitation) is as follows:

Bank name: The Bank of Scotland plc
Account name: City-BSC VCTs Joint Offers-Segregated
Account number: 22251869
Sort Code: 80-22-60

(B) Cheque

I will post a cheque or banker's draft, made payable to City-BSC VCTs Joint Offers-Segregated, crossed "A/C Payee only" and drawn in pounds sterling against a bank account held at a UK regulated credit institution in my own or joint name(s), **which I have referenced (back of cheque) with my initials and telephone number (alphanumeric, no spaces) provided in Section 1.**

Cheques should be sent to:

BSC & BSC2 Offers
The City Partnership (UK) Ltd
The Mending Rooms
Park Valley Mills
Meltham Road
Huddersfield
HD4 7BH

Remitting bank account details

Regardless of your payment method, please provide the details of the remitting bank account to allow the Companies' Receiving Agent to match, reconcile, and confirm receipt of your monies. Verification of your bank account also forms part of the Companies' checks under the Money Laundering Regulations.

The bank account should be held at a UK regulated credit institution and in **your name (sole or joint)** – the Companies do **NOT** accept payments from business accounts or third parties, including a spouse/civil partner.

Account in name of:

Sort Code:

Account Number:

Section 7: Applicant Declaration

By signing this Application Form, I hereby irrevocably declare that:

1. I have read and understood the Companies' Key Information Document which can be found at www.bscfunds.com;
2. I have decided to invest on the basis of the information in the Prospectus;
3. I agree to be bound by the Terms and Conditions of Application set out in the Prospectus;
4. I have provided accurate information, to the best of my knowledge;
5. I agree to the Companies facilitating payment of my financial Intermediary's fees and charges as set out in this Application Form;
6. I hereby authorise YFM to provide, to the financial Intermediary noted in Section 8 upon request, information regarding my shareholdings in the Companies (including any existing Shares) for which I have applied. This authority shall remain in effect until I revoke such authority by informing YFM in writing. This authority only extends to the provision of information regarding my shareholding, and I understand that my financial Intermediary will be unable to instruct any register changes or transactions on my behalf.
7. I consent to the Companies or a third party acting on the Companies' behalf, undertaking an online identity check for the purposes of the Money Laundering Regulations.

Print Name:

Signature:

Date:

APPLICATION FORM

Section 8: Financial Intermediary Details

Network Firm Name (if applicable):	Network Firm FCA No. (if applicable):
Firm Name:	
Firm FCA No:	
Firm Address 1:	Firm City:
Firm Address 2:	Firm Country:
Firm Address 3:	Firm Postcode:
Individual Adviser/Intermediary Name:	
Individual Adviser/Intermediary FCA No. (or equivalent):	Individual Adviser/Intermediary Partner Reference (if applicable)
<p>The Receiving Agent will acknowledge receipt of your client's Application and confirm when your client's monies clear the Offers' bank account by email. Please provide your email address below:</p>	
Individual Adviser/Intermediary Email Address:	
<p>Should the Companies or the Receiving Agent need to contact your firm regarding this Application, please provide the relevant administrative contact details below:</p>	
Administrative Contact Name:	Telephone Number:

Section 9: Financial Intermediary Remuneration

Please complete either (A) or (B) below:

(A) Initial Adviser Charge

I have provided financial advice to my client, who is not a Professional Client (as per COBS 3.5) and have agreed on the following initial Adviser Charge which complies with COBS 6.1A.

Please enter the initial Adviser Charge for facilitation in the box below. If you do **NOT** want the Companies to facilitate payment of the initial Adviser Charge, or you have made alternative arrangements, **please enter "0" if NIL.**

Initial Adviser Charge for facilitation (£):

(B) Initial Commission

We confirm and warrant to the Companies that we are entitled to receive commission in accordance with COBS 2.3/2.3A and any other applicable FCA regulations.

Initial commission may be waived (a maximum of 2% of the total Application Amount) for the benefit of your client. Please insert the amount of initial commission you wish to be waived in the box below (please enter "0" if NIL):

%

Initial commission waived (%)
(% of total Application Amount)

Fee/commission payment administration

Please confirm the bank account into which any Adviser Charges or initial commission payments associated with this Application should be paid by BACS:

Account in name of:

Sort Code:

Account Number:

Regarding any New Shares for which your client's Application is accepted, the Receiving Agent will send an allotment confirmation email and fee/commission statement to you. Pro rata payment of the initial Adviser Charge or initial commission will follow the allotment of New Shares.

Should you wish the Receiving Agent to carry a reference against any initial Adviser Charge or initial commission payment associated with this Application, please provide it below:

Payment reference:

If you would like your firm's finance department to receive a copy of a statement detailing the initial Adviser Charges or commission payment(s) due to your firm, please provide the relevant email address below:

Firm's Finance Department Email Address:

Section 10: Financial Intermediary Declaration

By submitting this Application Form, we, the financial Intermediary firm identified in Section 8 confirm that:

1. We have read and understood, and agree to be bound by, the Offer Terms and Conditions of Application set out in the Prospectus and as further set out in this Application Form;
2. We have applied customer due diligence measures on a risk sensitive basis in respect of the Application to the standard required by the Money Laundering Regulations within the guidance for the UK financial sector issued by the Joint Money Laundering Steering Group and in the event that the Companies, the Manager and/or the Receiving Agent require additional information in order to accept the Application, we will provide it to them within two Business Days of receiving their request;
3. Where we have provided advice to the Applicant in connection with an investment in the Companies, such investment is considered to be a suitable investment for the Applicant in their current circumstances;
4. Our details included in this Application Form are true and accurate;
5. We undertake to forthwith notify the Companies of any changes to our details provided above and/or if the Applicant ceases to be our client in respect of his or her investment in the Companies;
6. Where we have completed this Application Form on behalf of the Applicant, we confirm that the Applicant has given us the authority to do so; and
7. I confirm that I have the authority to sign this declaration on behalf of the financial Intermediary firm detailed in Section 8.

Name of Authorised Signatory:

Signature:

Date:

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