APPLICATION FORM

Before completing this Application Form you should read the prospectus issued by the Companies dated 14 December 2016 (the "Prospectus") including the Terms and Conditions of the Offers. Definitions used in the Prospectus apply herein, unless otherwise stated. The Offers open on 14 December 2016. The closing date for the Offers in respect of the 2016/17 tax year will be at 12.00 p.m. on 5 April 2017. If the Offers are not fully subscribed at that time, the Directors reserve the right to allow the Offers to remain open for at least part of the 2017/18 tax year, but not beyond 12.00 p.m. on 17 November 2017. Please send this Application Form together with your cheque or bankers' draft, if appropriate, and proof of identity if required, to Hargreave Hale Limited, Talisman House, Boardmans Way, Blackpool, FY4 5FY.

PLEASE COMPLETE IN BLOCK CAPITALS

Title (Mr/Mrs/Miss/Ms/Other):	Surname:		
Forename(s) in full:			
Date of Birth (DD-MM-YYYY):	Country/PI	ace of Birth:	
Permanent residential address:			
Postcode:		Email:	
Telephone (work):	none (work): Telephone (home):		
Please indicate ALL countries in which you a		x purposes and the relevant Tax Identification Number	er or
2. TAX RESIDENCY Please indicate ALL countries in which you a functional equivalent (for UK tax residents, the Country/Countries of Tax Residency)	nis will be your N		N
Please indicate ALL countries in which you a functional equivalent (for UK tax residents, the	nis will be your N	ational Insurance Number). Tax Identification Number (TIN)/	N
Please indicate ALL countries in which you a functional equivalent (for UK tax residents, the Country/Countries of Tax Residency	nis will be your N	ational Insurance Number). Tax Identification Number (TIN)/	N
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Please indicate ALL countries in which you a functional equivalent (for UK tax residents, the Country/Countries of Tax Residency 1:	nis will be your N	ational Insurance Number). Tax Identification Number (TIN)/ National Insurance Number	N
Please indicate ALL countries in which you a functional equivalent (for UK tax residents, the Country/Countries of Tax Residency 1: 2: 3:	nis will be your N	ational Insurance Number). Tax Identification Number (TIN)/ National Insurance Number	er or
Please indicate ALL countries in which you a functional equivalent (for UK tax residents, the Country/Countries of Tax Residency 1: 2: 3:	nis will be your N	ational Insurance Number). Tax Identification Number (TIN)/ National Insurance Number	N

3. ALTERNATE ADDRESS					
Please complete this section if you wish to nominate an alternative address, such as an accountant or financial adviser, for your share and income tax relief certificates.					
Title (Mr/Mrs/Miss/Ms/Other):	Surname:				
Forename(s) in full:					
Company Name:	Reference:				
Address:					
	Postcode:				
4. APPLICATION AMOUNTS					
The minimum subscription per Investor is $£5,000$ (and from this amount no less than $£2,500$ may be invested in each Company if the subscription is to be split equally or otherwise between both Companies). Applications in respect of less than $£5,000$ in aggregate will not be accepted.					
Price on the Terms and Conditions of the Offers:	n pounds sterling for New Ordinary Shares at the relevant Offer				
(1) Both Hargreave Hale AIM V((to be split equally)	OR (2) Hargreave Hale AIM VCT 1 (3) Hargreave Hale AIM VCT 2				
2016/17 tax year £	2				
2017/18 tax year £	£ £				
Total Investment (Box A)	2 2				
Please complete Column (1) in the box above if you require your application amount for New Ordinary Shares to be split equally between the two VCTs. Otherwise, please indicate your investment into each Company in columns (2) and (3). We will endeavour to contact you if there is any uncertainty as to your intentions; however, by default we will assume that your application is to be split equally between the two VCTs and the shares are to be allotted in the tax year in which the application is received.					
5. REGISTRATION DETAILS					
You may choose to have your shares issued to you in certificated form (share certificates) or electronically (dematerialised) direct to your CREST nominee company:					
I would like to receive Share Certificate(s) registered in my name and sent to my home address.					
I would like my shares to be issued directly to my CREST nominee company (please complete the box below).					
CREST Member Account ID:					
CREST Participant ID:					
Participant Name:					
Participant Address:					
Participant Point of Contact:					
Participant Contact Telephone					

6. DIVIDEND PAYMENTS	
	paid by cheque or transferred directly to your bank or building society accounts. Dividends paid directly funds on the dividend payment dates. Your bank or building society statement will identify details of thounts paid.
	shares registered to your CREST nominee company will be sent to your CREST nominee company. 'Equiniti' cannot accept responsibility if any details provided by you are incorrect.
I would like to receive all	dividend payments by cheque, sent to my home address.
I would like all dividend p	ayments to be made by bank transfer to the bank or building society account detailed below.
Name of Bank/Building Society: Title of Branch:	
Account Name:	
Account Number:	
Sort Code	
. FINANCIAL ADVICE	
Please indicate below whether or n	ot you have received advice from a financial intermediary in relation to your application for New
Ordinary Shares.	
	ancial advice (please proceed to Section 9).
I have not received any fina	
I have not received any fina	ancial advice (please proceed to Section 9). dvice (please complete Section 8 and ask your financial adviser to complete Section 12).
I have not received any fina	
I have not received any find	
I have not received any fine I have received financial acts B. ADVISER CHARGE Hargreave Hale cannot pay commis New Ordinary Shares. However, the pehalf. The Adviser Charge is treated applicable tax relief will only be availa	dvice (please complete Section 8 and ask your financial adviser to complete Section 12). Sesion to your financial intermediary if you have received advice in relation to your application for a Companies can facilitate the payment of an Adviser Charge to your financial intermediary on your separately to your investment in the Companies and will not attract any tax relief and accordingly any ble on the amount specified in Box A above.
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I have not received any financial acts. I have received financial acts. I have received financial acts. ADVISER CHARGE Hargreave Hale cannot pay commissew Ordinary Shares. However, the pehalf. The Adviser Charge is treated applicable tax relief will only be available per indicate below whether or not be paying an Advillance. I will not be paying an Advillance. I have made separate arrangements.	dvice (please complete Section 8 and ask your financial adviser to complete Section 12). Sesion to your financial intermediary if you have received advice in relation to your application for a Companies can facilitate the payment of an Adviser Charge to your financial intermediary on your separately to your investment in the Companies and will not attract any tax relief and accordingly any ble on the amount specified in Box A above. Total to the payment of an Adviser Charge to my financial intermediary. The payment of an Adviser Charge to my financial intermediary. The payment of an Adviser Charge to my financial intermediary (please complete Box B) and acknowledge and its complete Box B.

9. FINAL CONSIDERATION The total consideration is the combined value of your application amounts (Box A, Section 4) and (if applicable) any Adviser Charge that you require the VCTs to facilitate on your behalf (Box B). TOTAL AMOUNT PAYABLE (BOX C = A + B) £ 10. PAYMENT OPTIONS Please indicate below your chosen method of payment. I enclose a cheque or bankers' draft(s) drawn on a UK clearing bank for the amount specified in Box C above made payable to "Joint Offer Account of the HH AIM VCTs" I have instructed my bank to make an electronic payment to for the amount specified in Box C above (please quote your surname as a Name of Bank/Building Society: Royal Bank of Scotland..... Title of Branch: Joint Offer Account of the HH AIM VCTs Account Name: Account Number: Sort Code: 11. DECLARATION 1. By signing this form I hereby declare that I have read the Prospectus and agree to be bound by the Terms and Conditions of the Offer, including (where applicable) the Terms and Conditions of the Adviser Charge Agreement. 2. I undertake to advise promptly of any change in circumstances which causes the information contained herein to become incorrect or incomplete and to provide the above-named company with an updated declaration within 30 days of such a change in circumstances. 3. I am aware that in certain circumstances – for example, if I am tax resident or deemed resident of a reportable jurisdiction

- the above-named company will be obliged to share this information with the UK tax authorities, who may pass it on to

Date:

4. I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete.5. I am legally allowed to sign on behalf of the above-named holder. (If you are signing as Power of Attorney, please submit a

other tax authorities.

copy with this form.)

Signature:

Z	0	AUTHORISED FINANCIAL	INTERMEDIABLE
	۷.	AUTHURISED FINANCIAL	. IN LERIVIEDIARIES

Name of Firm: Hargreaves Lansdown	
	FCA Number: 115248
Name of Adviser: Ella Sibthorpe	Address/Stamp:
Email:	1 College square south Anchor rd Bristol
Telephone: 00179009000	BS1 5HL
12b. INVESTOR ADVICE	
Please select one of the following to confirm whether or not you application.	provided the Applicant with financial advice in relation to this
We did not give any financial advice to the Applicant (please pro	
12c. COMMISSION OPTIONS	
You may only receive commission if you have confirmed (through Secretation to this application. You may elect to receive 1% introductory	etion 12b) that you have not given any financial advice to the Applicant in commission and no trail Commission or 0.5% Introductory Commission with Hargreave Hale and detailed in Hargreave Hale's Terms of Business. ment.
You may only receive commission if you have confirmed (through Secretation to this application. You may elect to receive 1% introductory plus Trail Commission. The level of Trail Commission is to be agreed to	commission and no trail Commission or 0.5% Introductory Commission with Hargreave Hale and detailed in Hargreave Hale's Terms of Business.
You may only receive commission if you have confirmed (through Secretation to this application. You may elect to receive 1% introductory plus Trail Commission. The level of Trail Commission is to be agreed a Trail Commission will be paid annually in arrears for 5 years post allot	commission and no trail Commission or 0.5% Introductory Commission with Hargreave Hale and detailed in Hargreave Hale's Terms of Business. ment.
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12e. ADVISER CHARGES

The Hargreave Hale AIM VCTs can facilitate the payment of an Adviser Charge to you in accordance with the Terms and Conditions of the Adviser Charge Agreement described on pages 58 to 60. The Adviser Charge is treated separately to the Applicant's investment and will not attract any income tax relief.

Worked Examples:

- An Applicant can make an investment of £10,000 (Box A) and pay an Adviser Charge of £200 (Box B), which will require a cheque from the Applicant for £10,200 (Box C).
- An Applicant can submit a cheque for £10,000 (Box C), of which £9,800 (Box A) will be invested in new Ordinary Shares (and therefore

attract income tax relief) and £200 (Box C) will paid to you as an Adviser Charge.				
Adviser Charges				
Please indicate below whether or not you require the VCTs to facilitate the payment of an Adviser Charge.				
We will not be taking a fee from the Applicant in relation to this app	plication.			
We have made separate arrangements with the Applicant for the p	payment of an Adviser Charge in relation to this application.			
We require the VCT(s) to facilitate the payment of an Adviser Charge	ge in accordance with our client's instruction (as detailed in Section 8).			
12f. PAYMENT OPTIONS				
You can elect to have your Commission or Adviser Fee paid by cheque	or transferred directly to your bank or building society accounts.			
Please send all payments by cheque to the address listed in se	Please send all payments by cheque to the address listed in section 12a.			
Please send all payments by bank transfer to the bank or building society account detailed below.				
Name of Bank/Building Society:				
Title of Branch:				
Account Name:				
Account Number:				
Sort Code:				
Branch Address:				
12g SIGNATURE				
By signing this form the Financial Intermediary confirms that (i) the information set out by it at Section 12 are correct (ii) it agrees to the Terms and Conditions of the Adviser Charge Agreement (to the extent applicable to it) and (iii) if applicable, it agrees to the rebate of commission indicated by it at Section 12d of this Applicable Form.				
Signature:	Date:			