

Cash ISA (2008/2009) Application Form



Please complete in BLOCK CAPITALS using BLACK INK. **PLEASE NOTE:** Any applications received that are not completed correctly may incur delays or may have to be returned to you. If you would like to invest within FundsNetwork™ please visit fundsnetwork.co.uk.

1 Personal Details and Legal Requirements

TITLE	SURNAME	MALE	OR	FEMALE
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<input type="checkbox"/>

FIRST NAME(S) IN FULL

ADDRESS ("Care of" and PO Box are not acceptable. Only UK mainland and Northern Ireland addresses are eligible) HOUSE NUMBER AND/OR HOUSE NAME	EXISTING CLIENTS ONLY ACCOUNT NUMBER OR CLIENT NUMBER
<input type="text"/>	<input type="text"/>

STREET, CITY, COUNTY AND COUNTRY DETAILS	CONTACT TELEPHONE NUMBER (in case of query)
<input type="text"/>	<input type="text"/>

POSTCODE	DATE OF BIRTH
<input type="text"/>	<input type="text"/>

NATIONAL INSURANCE NUMBER (Will be 9 characters: 2 letters, 6 numbers followed by the letter A, B, C, or D.)	NO NATIONAL INSURANCE NUMBER? If you have never been issued with a National Insurance Number please mark an X in the box.	CROWN EMPLOYEE/SPOUSE OF CROWN EMPLOYEE? If your address is outside of the UK and you are a Crown Employee or the spouse/civil partner of a Crown Employee please mark an X in the box. Please refer to the legal declaration in Section 5 for an explanation.
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

2 Investment Details

I apply to subscribe for an ISA as indicated below in the tax year 2008/2009, and each subsequent year until further notice, if investing in Monthly Savings.

Cash ISA (Note: we cannot accept investments into a Stocks and Shares ISA on this application form. If you wish to invest into a Stocks and Shares ISA please contact Fidelity for the appropriate form.)

Maximum investment **£3600**. Please note, if you choose to invest a maximum of £3600 in a Cash ISA, you will only be allowed to invest a maximum of £3600 into a Stocks & Shares ISA in this tax year.

Please complete your investment amount(s) below.

FUND CODE	FUND NAME	LUMP SUM (£)	MONTHLY (£) *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Income Option? This option is not available for the Moneybuilder Cash ISA Fund. If you invest in this fund all income will be automatically reinvested.

* **Monthly Savings:** Any Monthly Savings Plan details given in this section will override any existing Cash ISA Monthly Savings amount.

If investing a lump sum you must identify your payment method in Section 3.

If you are investing monthly you must complete your mandate details in Section 4.

PLEASE TURN OVER

T 0 0 0 4 1 0 1

3

Lump Sum Payment Details

Cleared funds must be available BEFORE submitting your application. Please mark an X in the appropriate box.

CHEQUE PAYMENTS

I enclose a cheque payable to FIDELITY

Cheques must be issued from your personal or joint account as third party payments are not accepted. Building Society and Bank Draft payments must bear a reference to confirm that this is your money. Please ensure your name is clearly added, by the issuing bank only, on the face of the cheque.

CARD PAYMENTS

I wish to pay by VISA DEBIT

I wish to pay by MAESTRO

CARDHOLDERS NAME

[Empty box for cardholder name]

MAESTRO/VISA DEBIT NUMBER - from the middle of the card (note - not the "Card Number", if present)

ISSUE NO.

START DATE

END DATE

[Grid of boxes for card number]

[Grid of boxes for issue no]

[Grid of boxes for start date]

[Grid of boxes for end date]

4

Mandate Details

Instruction to your Bank or Building Society to pay by Direct Debit. Please pay Financial Administration Services Limited Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with Financial Administration Services Limited and, if so, details will be passed electronically to my Bank/Building Society. Banks and Building Societies may not accept Direct Debit instructions for some types of accounts.



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

ORIGINATORS REFERENCE NUMBER (Fidelity use Only)

[Empty box for account holder name]

[Empty box for reference number]

NAME AND ADDRESS OF BANK OR BUILDING SOCIETY

BANK/BUILDING SOCIETY ACCOUNT NUMBER

[Empty box for bank address]

[Grid of boxes for account number]

BRANCH SORT CODE

[Grid of boxes for branch sort code]

SIGNATURE AND DATE (YOU MUST SIGN HERE to set up a Monthly Savings Plan (MSP). You must also sign Section 5.)

[Signature box with X]

[Date box with 20]

Originators Identification Number: 922631

5

Declaration & Signature

Your Fidelity ISA is managed by Financial Administration Services Limited, a Fidelity Group company. I understand that the information I 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 confirm that I have received the relevant Key Features Document/Simplified Prospectus relating to this investment, and Terms which I accept. I declare that:

- All subscriptions made, and to be made, belong to me, and that I am 18 years of age or over.
I have not subscribed, and will not subscribe, more than £7200 in total to a Cash ISA and a Stocks and Shares ISA in the same tax year.
I have not subscribed, and will not subscribe, more than £3600 of the overall £7200 total to a Cash ISA.
I have not subscribed, and will not subscribe, to another Cash ISA in the same tax year that I subscribe to this Cash ISA.
If investing in the MoneyBuilder Cash ISA Fund — I hereby assign to J.P.Morgan Trustee and Depository Company Limited ("MTDL") as the Trustee of the MoneyBuilder Cash ISA Fund ("the Fund") all amounts received by Fidelity Investment Services Limited pursuant to its exercise of the authority to make reclaims on tax on income allocations to my units in the Fund. This assignment is granted on the basis that each tax reclaim amount shall be attributed to the Fund. MTDL, in its capacity as trustee of the Fund, may in any manner assign, transfer, charge or make over this assignment or its rights and duties hereunder or any part thereof.
I am resident and ordinarily resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or I am married to, or in a civil partnership with a person who performs such duties. I will inform Fidelity if I cease to be so resident and ordinarily resident or to perform such duties or be married to, or in a civil partnership with, a person who performs such duties.
I authorise Financial Administration Services Limited:
i to hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash;
ii to make on my behalf any claims to relief from tax in respect of ISA investments.
The information given by me is correct to the best of my knowledge, and I 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 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.

[Signature box with X]

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

[Date box with 20]

6

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

[Empty box for intermediary stamp]

UNIQUE ADVISER NUMBER

[Grid of boxes for adviser number]

FSA FIRM REF NO.

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

[Grid of boxes for FSA firm ref no]

OFFICE USE ONLY

[Empty box for office use only]