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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

[Empty box for account holder name]

BANK/BUILDING SOCIETY ACCOUNT NUMBER

[8 digit account number boxes]

BRANCH SORT CODE

[6 digit branch sort code boxes]

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 that your 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.

[14 digit building society collection account number boxes]

NAME AND ADDRESS OF BANK OR BUILDING SOCIETY

[Empty box for bank/building society name and address]

Note: Income payments will be paid monthly and will include any income paid by the funds and any income tax reclaims received within your ISA during the previous month. For further information on income payments, please refer to the Key Features Document/Simplified Prospectus.

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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 to another Stocks and Shares ISA in the same tax year that I subscribe to this Stocks and Shares ISA.
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 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.

X [Signature box]

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

[Date boxes: 2 0]

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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

[Empty box for intermediary stamp]

UNIQUE ADVISER NUMBER

[8 digit unique adviser number boxes]

FSA FIRM REF NO.

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

[12 digit FSA firm ref no. boxes]

COMMISSION INSTRUCTIONS.

Please enter the percentage (%) commission you wish to take here, for this specific client, in 0.25% increments. If left blank, standard terms will apply.

[Commission percentage boxes: . %]

OFFICE USE ONLY [Empty box]

Please be aware that if the Agency details differ to those already on the client's Fidelity account then the new details will override. This will mean any ongoing commission payments will be paid to the new agency from the deal settlement date.