

Maven VCT Offers – Application Form

TO BE COMPLETED BY AN APPLICANT (and/or a financial intermediary or nominee firm if they are applying on behalf of an Applicant)

Before applying you should read the Terms and Conditions of Application contained in the Securities Note and the APPLICATION NOTES AND INSTRUCTIONS (which can be downloaded from mavencp.com/vctoffer). Definitions used in the Securities Note dated 2 October 2025 apply here. If you have any questions about the completion of this form, please see the APPLICATION NOTES AND INSTRUCTIONS or contact City Partnership (see contact details at the end of this form).

Please complete this form as outlined in the Application instructions or it may not be accepted, and use BLOCK CAPITALS.

1. Complete if the application is through a Financial Intermediary (if not, go directly to Section 2)

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TICK this box, and the **intermediary should complete sections 7 to 9.**

If the intermediary firm is part of a network or uses a service provider, also give the network/provider name here:

2. Applicant Details

Title (e.g. Mr/Mrs/Dr) Forename(s):

Surname(s): Date of Birth: / /

Address:

Post Code:

If you have lived at your current address for less than three years, please provide your **previous address**:

Post Code:

Email*:

Daytime Telephone*:

***Mandatory**, required by City Partnership in order to process your Application and monies.

Tax residency: if you are a tax resident of the UK, please provide your National Insurance Number (or your Unique Taxpayer Reference (UTR) if you do not have a National Insurance Number):

National Insurance Number: UTR:

Please indicate any other countries where you are a tax resident, and the taxpayer identification numbers (TIN):

Country: TIN: Country: TIN:

☐ Please **TICK** if you are a US citizen or a 'tax resident' of the US (see APPLICATION NOTES AND INSTRUCTIONS for more detail and/or consult your tax adviser).

Existing shareholder details: if you (or your spouse/partner) are a shareholder in any Maven VCT (including Maven Renovar), please **TICK** one box below **AND** add details:

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Shares held on share register(s) with the following City Investor Number(s) (CIN*):

*May be found on correspondence from the Registrar or on the "My Shares" page if you have registered for City's Maven VCT Investor Hub at maven-cp.cityhub.uk.com

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Shares are held with the following nominee:

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3. Application Amounts

The payment provided with the Application must equal the **Total** Application Amounts set out below and must include any initial adviser fee to be paid to a financial adviser through this Application. The minimum Application amount is **£5,000 overall** and £1,000 in each Maven VCT for which you apply.

I wish to apply for the amounts shown below (in whole pound amounts, enter £0 for any VCTs for which you are not applying):

Tax Year	Maven VCT 1	Maven VCT 3	Maven VCT 4	Maven VCT 5
2025/2026	£ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00	£ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00	£ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00	£ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00
2026/2027	£ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00	£ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00	£ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00	£ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00
Total (per VCT)	£ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00	£ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00	£ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00	£ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00

Re-allocation/Return Instructions

In the event that one or more of the Offers for which I have applied has closed, or is deemed closed, at the time my Application Form is processed, then I hereby request the following (**TICK ONE BOX**):

- ☐ (a) the amount in respect of the closed Offer(s) to be **re-allocated equally between the Offer(s) that I have applied for and that remain open** (in respect of the same tax year), **OR**
- ☐ (b) the amount in respect of the closed Offer(s) be **re-allocated equally between ALL of the Offer(s) that remain open** (in respect of the same tax year), regardless of whether I have applied for them, **OR**
- ☐ (c) the amount in respect of the closed Offer(s) **be returned** to my account detailed in Section 4

Please note – if you fail to tick a box above, the default position set out in the Application instructions will apply.

4. Payment Details

TICK ONE BOX below to indicate how you are paying, **AND** provide details of the account from which you will provide funds. **Payment must be in pounds sterling from an account in your sole or joint name.**

Payment should be made as soon as you have submitted the application. When making payment, please use a reference (alphanumeric, no spaces) comprising *your initials followed by the phone number* you have given in Section 2.

☐ **Bank transfer** to be made to the following account (please use the payment reference format described above):

Account Name: **City-Maven VCTs-Segregated** Account number: **22226364** Sort Code: **80-22-60**

☐ **Cheque or banker's draft** made payable to **City-Maven VCTs-Segregated** (please write your payment reference on the reverse of the cheque).

Details of your account:

Account Name: Sort Code: - -

Account Number: Building Society Roll/Ref. Number:

5. Shareholder Preferences

Share Registration: if you wish any New Shares to be issued to a Nominee (rather than receive a Share certificate) please provide the following Nominee information:

CREST Participant ID (if applicable): CREST Member Account ID (if applicable):

Nominee Name: Nominee Account Ref:

Contact Name:

Contact Email:

Address:

Post Code:

Note: If Nominee information has been provided above, **do not complete the "Communications from the VCTs" and "Dividends" sections below** - you should instead contact your nominee regarding your preference.

Communications from the VCTs: please **TICK ONE BOX** to indicate how you would like to receive annual and interim reports or be notified of their online publication (this choice will apply in respect of New Shares and existing holdings):

Notifications by email: ☐ **OR** Notifications by post: ☐ **OR** Hard copy documents by post: ☐

Dividends

Please **TICK ONE BOX** to indicate how you wish to receive all dividends paid by the Maven VCTs to which you have applied (in respect of New Shares and existing Shareholdings). If you do not tick an option, you will receive dividends in line with your current choice (if you are already a Shareholder) or otherwise by cheque.

☐ **Paid by bank transfer** - I elect to have my dividends paid into the account below (write "As Above" if they should be paid to the account detailed in Section 4):

Account Name: Sort Code: - -

Account Number: Building Society Roll/Ref. Number:

☐ **Dividend Investment Scheme (DIS)** - I elect to participate in the DIS of those Maven VCTs to which I have applied, and confirm that I have read the terms and conditions of those schemes.

VCT marketing information: if you would like Maven to register you to receive VCT newsletters, news of portfolio investments and information about future VCT Offers, please **TICK THIS BOX:** ☐

If you are not applying through a financial intermediary, go directly to Section 6.

Authority for the Share Registrar to provide shareholding information to a financial intermediary

☐ **TICK** this box if, once your Shares have been allotted, you are happy for the Registrar to provide information about your shareholdings (in the Maven VCTs to which you have applied) on request to any financial intermediary noted in Section 7 (and any associated network or service provider the intermediary uses, as noted in Section 1). This authority shall remain in effect until you revoke it by informing the Registrar in writing. If you do not tick the box, any previous authorities provided in respect of the Maven VCTs to which you have applied will expire, and the Registrar will not be able to provide them with information about your shareholdings unless you provide a new authority.

6. Declaration by/for Applicant (only to be signed by an Applicant or their intermediary or nominee)

Who is completing this declaration: **The Applicant** ☐ **The financial intermediary** ☐ on behalf of the Applicant

A nominee firm ☐ on behalf of the Applicant*

*See APPLICATION NOTES AND INSTRUCTIONS for information about any evidence required by City of the nominee's authority to apply for and/or make the investment.

I DECLARE THAT the Applicant or we on their behalf: (i) have read the Terms and Conditions of Application set out in the Securities Note and agree to be bound by them, including providing any evidence of identity requested by the Receiving Agent; (ii) have provided accurate information and will notify the relevant Maven VCTs in the event there are changes to the Applicant's circumstances; (iii) understand that this subscription represents a long-term investment and confirm that the Applicant has read the risk factors set out in the Securities Note and the full Prospectus; (iv) have read USE OF YOUR PERSONAL INFORMATION in the Securities Note regarding the use of the Applicant's personal data provided with this application, and agree to its use in accordance with that section; and (v) if we have completed the Application on behalf of the Applicant, they have given us the authority to apply for and/or make the investment.

Signature:

Date / /

Print Name:

Remaining sections to be completed only by a Financial Intermediary (if applicable).

7. Financial Intermediary Details

Firm Name:

FCA Number: Administrator/Adviser name*

Email*:

Telephone*:

*The Receiving Agent will use these contact details to issue application acknowledgements, or in the event of any queries in respect of this Application or intermediary fees/commissions.

Please **TICK THIS BOX** if you wish Maven to use these details to send you information about its VCT offers and VCT related news. ☐

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8. Initial Adviser Fees or Commissions

You must complete **ONE** of 8a OR 8b (even if NIL entries) **AND**, if applicable, provide your bank account details below

8a. Initial Adviser Fee (only for applications where advice has been provided to the applicant)

If the Applicant has agreed that an initial adviser fee is to be facilitated to you by the Receiving Agent, from the monies provided with the Application, enter that adviser fee below (which can represent a maximum of 4.5% of the Application Amounts and must be included in the amounts shown in Section 2 and as part of the monies provided by your client).

Initial adviser fee (enter a £ amount, or £0 if no initial adviser fee is to be paid): £ , .00

8b. Initial Commission (only for non-advised applications)

You are entitled to up to 3% initial commission in respect of a non-advised or execution-only application, but can waive all or part of it for the benefit of your client. Enter below the part of the 3% commission that **is to be waived** (for example, if you are to be paid 1% initial commission please enter 2% in the box).

Initial commission **to be waived** (must be a % between 0% and 3%): . %

Payment of Initial Adviser Fees and Initial Commissions: please provide your bank account details (payment will be by bank transfer). If you would like your finance team to receive a copy of the commission or fee statement issued by City Partnership, please provide their email address (City will charge a £10 administration fee for later requests for copy statements).

Account Name:

Sort Code: - - Account Number

Email (of finance contact):

9. Financial Intermediary's Declaration

By signing this form I **DECLARE THAT** I am the Financial Intermediary, or have the authority to sign this declaration on behalf of the Financial Intermediary, and have read the Terms and Conditions of Application set out in the Securities Note (and as further contained herein) and agree to be bound by them. I confirm that: (i) the amount inserted in Section 8a or 8b above (if applicable) has been agreed with the Applicant named in Section 2; (ii) we have verified the Applicant's identity to the standard required by the Money Laundering Regulations; (iii) where advice has been provided in respect of this application, we confirm a) our understanding of the characteristics of the Maven VCTs, including risks and costs, which have been clearly explained to the Applicant, and that we are comfortable that the investment offers fair price and value when aggregated with any distributor related fees and charges, and b) that the investment is considered suitable for the Applicant in their current circumstances and the Applicant falls within the intended target market, and c) that we have taken into consideration and addressed any additional support needs of the Applicant, and undertake to notify the Maven VCTs immediately should we become aware of a change in the Applicant's circumstances; and (iv) where trail commission is being paid in connection with this Application, we will confirm to Maven and the VCTs annually that the Applicant still holds the shares and remains our client, and that we have not subsequently provided advice in respect of the shares allotted. If we have completed the Application Form on behalf of the Applicant, I confirm that the Applicant has given us the authority to do so, and that the Applicant will be providing funds in respect of the Application.

Signature:

Date: / /

Print Name:

Submitting your Application (also see separate APPLICATION NOTES AND INSTRUCTIONS document)

This Application Form must only be submitted to the Receiving Agent, City Partnership (not to Maven) as follows:

By email to mavencp@city.uk.com; OR

By post to **Maven VCT Offers, The City Partnership (UK) Ltd, The Mending Rooms, Park Valley Mills, Meltham Road, Huddersfield HD4 7BH** (if you are paying by cheque or banker's draft, please ensure that it is attached to the Application Form).