

# Application Form

## Important: before completing this Application Form you must:

- ▶ Read the accompanying Share Offer Document
- ▶ Pay special attention to the Risk Factors set out in this Offer Document
- ▶ Consider where you need to take financial advice or other advice in relation to the Terms and Conditions of the Offer contained in the Offer Document
- ▶ Read the Rules of Awel Co-op available at [www.awel.coop](http://www.awel.coop)

## PLEASE USE CAPITALS AND BLACK INK AND COMPLETE BOTH PAGES OF THE APPLICATION FORM

### Amount to invest

I wish/my organisation wishes to invest a total amount of £\_\_\_\_\_ in Awel Co-op on the Terms and Conditions of the Offer Document at the price of £1.00 per Share. (You may invest not less than £50 and not more than £100,000).

### Payment of Interest

If you would like your annual interest payments to be paid by BACS rather than by cheque, please provide bank details:

Name on Account	
Sort Code	
Account Number	

### Individual Applicant Details

Title (Mr/Mrs/Ms/other):	Forenames:
Surname:	
Address:	
Post code:	Day-time Telephone:
Email:	

*Please provide your email address if possible to keep costs of administrating the Co-operative to a minimum.*

### Organisation Details

If the Applicant is an organisation please fill in the contact details above and also the following:

Organisation name:	
Organisation address:	
Type of organisation:	Registration Number:
Name of authorised signatory signing this application form:	
Position of authorised signatory	

Please continue to and sign the Declaration overleaf



# Declaration

## I confirm my understanding that:

- ▶ When accepted by Awel Co-op this Application forms a contract subject to the law of England and Wales on the Terms and Conditions of the Offer Document.
- ▶ An Applicant who/which is not UK resident is responsible for ensuring that this Application complies with any laws or regulations applicable outside the UK to which he/she/it is subject.
- ▶ If the Offer is oversubscribed it is possible that an otherwise eligible Application will not be accepted in part or in whole.
- ▶ If insufficient funds are raised by the Offer, Application Monies may not be returned and that alternative sources of funding will be sought by Awel Co-op to make up the shortfall.

## I confirm that:

- ▶ I have read the Offer Document (including the Risk Factors and the Guidance Notes to this Application Form) and the Rules of Awel Co-op.
- ▶ I am over 16 and the Applicant meets the Offer eligibility criteria.
- ▶ Awel Co-op is hereby authorised to make such enquiries as are deemed necessary to confirm the eligibility of this Application.
- ▶ The Applicant is not (unless a Registered Society) making an application or multiple applications for a total of more than 100,000 Shares.
- ▶ The Applicant is not relying on any information or representation in relation to the Offer Shares in Awel Co-op which is not included in the Offer Document.
- ▶ The Applicant shall provide all additional information and documentation requested by Awel Co-op in connection with this Application, including in connection with money laundering, taxation or other regulations.
- ▶ If signing this Application on behalf of any person/organisation I am doing so with explicit authority

**I understand that the cheque supporting this application (if enclosed) will be presented for payment upon receipt and I warrant that it will be paid on first presentation.**

<b>Signature</b> ( <i>Applicant/on behalf of applicant organisation as applicable</i> ):	<b>Date:</b>
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## Payment

I wish to pay by (*tick as appropriate*)

<input type="checkbox"/> Cheque	<input type="checkbox"/> BACS (bank transfer)
Please attach a single cheque or banker's draft for the amount shown above, payable to Awel Ltd and crossed a/c Payee.	Please pay by BACS to the following account: Account name: Awel Ltd Sort code: 16 58 10 Account number: 20647522 Please use your name as the reference attached to the transfer.

- ▶ If we need to return any or all of your monies because of oversubscription or cancellation of the project, please indicate whether you would like this returned by cheque or by BACS to your account specified overleaf.

Please return any monies by cheque:  BACS:

- ▶ Send your completed Application Form and payment to:

Awel Co-op, 76-78 Heol Gwilym, Cwmllynfell, Neath Port Talbot, SA9 2GN, or sign, scan and email to [info@awelamantawe.co.uk](mailto:info@awelamantawe.co.uk)

- ▶ We would be grateful if you would inform us of how you first heard of this Share Offer:

This application form can be photocopied and additional application forms are available. For all enquiries use the contact details on the back of this Offer document.

**Thank you for considering joining Awel Co-op.**

