

PROPERTY VALUE ADD FUND

INVESTOR DETAILS

I/We hereby apply in the name/s of

(For Joint Investors, Applicant A should refer to the more experienced investor.)

(A) NAME (MR/MS)								
DATE OF BIRTH			Place of Birth (Town/City)					
PPS NUMBER			(1 1 1 3)					
OCCUPATION/								
FORMER OCCUPATION								
ADDRESS								
TELEPHONE	Day		Mobile					
EMAIL								
EMPLOYMENT STATUS: (please tick one)	Employed	Self Employed	Not Employed	Retired				
If you are Employed or Reti	ired please confirm:							
Name of Employer or former Employer								
What is/was your role/ occupation								
What is/was the nature of your En former Employers business	mployers/							
If you are Self Employed pl	lease confirm:							
Please provide a brief description business activities	of your							
Please detail the country or count at least 20% of turnover originate								
Your website (if applicable)								
(B) NAME (MR/MS)			Place of Birth					
DATE OF BIRTH			(Town/City)					
PPS NUMBER								
OCCUPATION/ FORMER OCCUPATION								
ADDRESS								
TELEPHONE	Day		Mobile					
EMAIL								
EMPLOYMENT STATUS:		1						
(please tick one)	Employed	Self Employed	Not Employed	Retired				
If you are Employed or Reti	ired please confirm:							
Name of Employer or former Employer								
What is/was your role/ occupation								
What is/was the nature of your En former Employers business	mployers/							
If you are Self Employed pl	If you are Self Employed please confirm:							
Please provide a brief description business activities	of your							
Please detail the country or count at least 20% of turnover originate	tries where es							
Your website (if applicable)								

(C) CORPORATES, CHARIT	IES, PENSI	ON SCHEME	ES							
NAME OF APPLICANT										
ADDRESS										
TELEPHONE	Day				Mobile					
EMAIL	Day				riodite					
LEGAL ENTITY						(Required for No	te based p	roducts	s not depo	osits)
IDENTIFIER (LEI)										
Please complete for Corpo		Charities:								
Please provide a brief description business activities	of your									
Please detail the country or coun at least 20% of turnover originat	tries where es									
Your website (if applicable)										
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2 POLITICALLY EXI	POSED PEI	RSON (PEP),	, RELATIVE C	R CLOSE	E ASSOCIATE (R	CA) OF A PEP	ND OT	HER F	PERSOI	NS
Are you are my of the Depolicionies	Tuustaas Catt	lava Ammaintova	au in tha ann af	- C	Owner Director Box	andinial Owner			1	
Are you or any of the Beneficiaries, (or have been), a PEP or RCA of a PE		iors, Appointers	or in the case or	a Company	Owner, Director, Ber	ieliciat Owner	Yes		No	
Do you or any of the Beneficiarie Owner hold (or have held) a pron						ctor, Beneficial	Yes		No	
Are you or any of the Beneficiarie Owner involved (or have been) in			nters or in the ca	se of a Cor	mpany Owner, Dire	ctor, Beneficial	Yes		No	
If you have answered Yes to any An explanation of these terms i					Persons of Influe	nce Supplementar	y Form.			
3 INVESTMENT DE	TAILS									
INVESTMENT TYPE	Investr	ment	Pension/Tax Ex	empt						
AMOUNT	€									
	ВСР	PROPERTY	VALUE ADD	FUND						
METHOD OF PAYMENT		k Transfer refer to Bank detai	ils below)		2. Cheque/Bank (Please note that ar	Draft ny cheque or Bank draft				
INVESTMENT ADVICE					is to be payable to l	BCP Asset Management)			
PROVIDED BY	Interm	nediary	ВСР	Investr	ment advice not pro	ovided				
Is the applicant the beneficiary a	nd controller	of these invest	ment funds?				Yes		No	
If No, please provide the name(s)	of the Benef	ficial Owner/Co	ontroller and rela	ationship to	you:					

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IBAN

BANK TRANSFERS (INVESTMENT FUNDS SHOULD BE TRANSFERRED TO THE BANK ACCOUNT BELOW)

Please use your full name/appl	icant name	as a referenc	e when arranging for a t	ransfer to be made to the	above s	ubscription account details.			
ACCOUNT NAME		BCP Prop Sub-Fund 1 / CO							
CURRENCY		Euro							
IBAN		FR 76300	R 76300 0305 6050 0003 1310 7631						
SWIFT		SOGE FRPF	PAFI						
E CONFIDMATI	011.05.6	CURCE	EWENTH AND CO	NURSE OF FUNDS					
SOURCE OF WEALTH	To comply	r with the requor provide info COR Incom Retire Saving Bonus Sale o	e from employment ment lump sum gs/Reinvestment	l Justice (Money Launder	e of weal	Terrorist Financing) Act 2010 as amended, you are ith in respect of the amount you are investing. ESTOR New investment from existing funds Encashment of another product Reinvestment from BCP product Bonus Other (Please provide details below)			
				Investor 1:					
				Investor 2:					
PAYMENT BY If payable by EFT or Ba	Personal	·	Bank Dra nion Draft, please		Union D				
BANK/BUILDING SOCI	ETY/CRI	EDIT UNIC	N NAME						
ACCOUNT NAME									
IBAN									
LOCATION OF BANK A	CCOUNT	r							
6 BANK DETAIL	LS FOR R	REDEMPTI	ON & DISTRIBUTION	ON PAYMENTS					
Please note that redemption processed in accordance with policy as detailed in the Proseurable Please list the details of the which redemption proceeds, distributions should be paid. be made to a bank account hof the registered Unitholder. Payments will be made.	h the reder pectus. account to and/or div Payments aeld in the	widend s will only name	for all banks within the Amendments to invest will only be effected of instruction which has the case of joint subs	stors' payment instructi upon receipt of an origi been duly authorised. criptions, instructions v eceipt of instruction dul	ions nal In vill	The investor acknowledges that none of the parties defined in Section 15 of this application form accept any responsibility for the investor's bank account details provided and that any payment using these details will be at the investor's risk.			
BANK NAME									
BANK ADDRESS									
ACCOUNT NAME									
SWIFT (BIC)									

TAX STATUS

This section must be completed by all Investor(s):	INVESTOR 1	INVESTOR 2
I/we confirm that I/we are resident (or ordinarily resident) in Ireland for Irish tax purposes a are not classified as an exempt Unitholder.	ind	
2. I/we confirm that I/we are resident (or ordinarily resident) in Ireland for Irish tax purposes a fall within the categories listed in section 739D(6) Taxes Consolidation Act of Ireland ("TCA"		
3. I/we confirm that I/we are not resident (or ordinarily resident) in Ireland		
If you have confirmed that you fall within category 2 (e.g. the investor is a please note that you are required to complete additional documentation exit tax. Please contact BCP Asset Management for the relevant documen	to confirm that you are exempt fro	
Please complete the following section, if relevant, in order to comply with US FATCA Regulation	ons.	
For Personal Investors: If you are a US Citizen or US Resident for Tax purposes please tic Security Number (SSN) or Tax Identification Number (TIN).	ck the box and provide either your U.S. Socia	l
INVESTOR 1	INVESTOR 2 (IF APPLICABLE)	
SNN or TIN		
For Corporate/Trust/Other Non Personal investors: Is one or more Controlling Persons either a US citizen or a US Resident for Tax Purposes:	Yes No	
If the answer is 'Yes' please provide the name(s) and either U.S. Social Security Number (SSN) or Tax Identification Number (TIN) in the box below		

QUALIFYING STATUS

I/we hereby subscribe for units in the BCP Property Value Add Fund.

I/we, being a subscriber for Units in the Fund confirm that I/we fulfill the following conditions:

I/we hereby certify that I am/we are a Qualifying Investor, as defined in the prospectus, in that I am/we are:

(a) An investor who is a professional client within the meaning of Annex II of Directive 2004/39/EC (Markets in Financial Instruments Directive) ("MiFID");

OR

(b) An investor who receives an appraisal from an EU credit institution, a MiFID firm or a UCITS management company that the investor has the appropriate expertise, experience and knowledge to adequately understand the investment in the Trust;

OR

- (c) An investor who certifies that they are an informed investor by providing the following:
- (i) a written confirmation that the investor has such knowledge of and experience in financial and business matters as would enable the investor to properly evaluate the merits and risks of the prospective investment;

OR

(ii) a written confirmation that the investor's business involves, whether for its own account or the account of others, the management, acquisition or disposal of property of the same kind as the property of the Trust;

AND

I/we certify that I/we meet these minimum criteria and I/we am/are aware of the risks involved in the proposed investment and of the fact that inherent in such investment is the potential to lose all of the sum invested.

9 DATA PROTECTION

BCP Asset Management DAC complies with the requirements of the General Data Protection Regulation 2018.

"Information" means any information given by you or on your behalf in connection with your Investment Application to us. Where you are not a natural person, Information also includes any information you provide to us in respect of your officers, directors or employees, in this regard the use of the term 'you' in this Data Protection refers to you or such individuals as appropriate. Information includes any further information which may be given at a later stage either in writing, by email at a meeting or over the telephone including that furnished in connection with any application for any product/service available through us.

The Information will be used by us for the purposes of processing your applications, managing and administering your relationship with us and any products/services for which you have completed an application. The information will also be used for the prevention of money laundering, financing of terrorism or fraud, and compliance with any legal and regulatory obligations which apply to us.

The Information may be disclosed to BCP Asset Management group, third parties including, but not limited to, the intermediary acting on your behalf, product producers/service providers to which you have submitted an application or to which such submission is being contemplated, the providers of services to us, the Administrator, distributors, the Trustee and/or their respective delegates and agents of any Fund you are invested in. We may also disclose your data for legitimate business interest & legal obligations, to auditors, the Central Bank of Ireland, the Irish Revenue Commissioners, other relevant regulators and tax authorities. For further information on Foreign Account Tax Compliance Act (FATCA) or Common Reporting Standard (CRS) please refer to Irish revenue website at http://www.revenue.ie/en/business/aeoi/index.html or the following link: http://www.oecd.org/tax/automatic-exchange/common-reportingstandard/ in the case of CRS only.

Right of access, rectification or erasure

You have the right at any time to request a copy of any "personal data" (within the meaning of the General Data Protection Regulation 2018 and the Irish Data Protection Act 2018) that we hold in relation to you and have it corrected if it is inaccurate or out of date. To exercise your Right of Access or to update your details under your Right of Rectification or Erasure please email your request to the Dataprotection@bcp.ie

Data Retention

Information submitted by you when making an enquiry may be retained by us for a period of up to 12 months from the date of the enquiry. Your information will be held for a period of at least 6 years after the ending of the client relationship.

Data Security

BCP Asset Management DAC intent is to strictly protect the security of your personal information and carefully protect your data from loss, misuse, unauthorised access or disclosure, alteration or destruction. We have taken appropriate steps to safeguard and secure information by us.

Call Recording

Calls from and to the office may be recorded for verification, fraud prevention, training and monitoring purposes.

ASSESSMENT OF APPROPRIATENESS

BCP will treat you as a retail client for the purposes of MiFID. This means you will receive the highest level of MiFID protection. You may request to be treated as a professional client providing you meet additional criteria however, if you do so, you will lose some of the protections afforded to retail clients under MiFID.

The following information must be completed to assess the appropriateness of the investment for you.

Investment objective:	Capital Growth	OR	Income	
	Capital Growth		income	
What is the minimum period over which you intend to invest in this fund:	3-5 Years	5-7 Years	> 7 Years	
(Please note BCP do not consider the Fund an appropriate investment for an investment term of less than 5 years)				
Have you previously invested in property assets before, either directly or indirectly?	Yes	(provide details ir	n the box below) No	
(Please note BCP do not consider the Fund an appropriate investment for an investment term of less than 5 years)				

When we assess appropriateness for joint applicants or non personal entities, we will base our recommendation or our understanding of financial experience and knowledge on that applicable to the **most experienced person** connected with the application.

Experienced Investor Name:	
Limited: Have some knowledge but limited trading history.	
Good: Have knowledge and have traded over a number of years.	
Extensive: Have knowledge and have traded consistently over the past 5 years.	
Investment Experience - Please indicate your investment experience:	

Note: Experience either direct or indirect is considered relevant e.g. investment experience via life office funds, UCITS, unit trusts or other fund type structures

	None	Limited	Good	Extensive	No. of years experience	No. of Investment/ Trades placed	Investment Advice Used	No Investment Advice Used	Discretionary
Property Funds/Property (Ungeared)									
Property Funds/Property w(Geared)									
Equities/Equity Funds									
Investment Funds									
Unit Linked Funds									
Government Bonds									
Corporate Bonds									
Notes/Debt Securities									
Notes, including descriptio property/shares/bonds/fu			i	<u>i</u>	<u>i</u>	<u>i</u>	<u>i</u>	.i	<u>i</u>
First Investor Occupation/F	Former Occupation	on:	.	<u>.</u>	.	···•		·· · ·····	<u>.</u>
Second Investor Occupatio	n/Former Occup	ation:		<u>.</u>	<u>.</u>	···•		·· <u>·</u> ·····	.
Do you have a professional	qualification: Ye	s / No (Please C	ircle)		.		•	·· ·····	•
lf yes, please provide detai	ls:		······		.		•••••	·- <u>-</u>	•
	••••								

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DECLARATIONS

I/we declare that the statements/information in this application, including any written at my/our request, are true and complete and shall form the basis of the proposed subscription.

I/we understand that there is no subscription until such time as BCP Fund Management have accepted my/our application and issued my Investment Schedule even if I have made a payment.

I/we hereby certify that the information provided by me/us in section 8 Tax Status is correct and accurate at the time of making the application. I/we confirm that I/we will advise the Administrator of any change to my/our (i) contact details, (ii) country of residence or citizenship or (iii) tax status. I/we understand failure to do so may result in the Trust suffering taxation (and

other expenses) which may be recoverable from me/us.

I/we confirm that the information provided by me/us in section 9 Qualifying Status is correct and accurate at the time of submitting this application. I/we confirm that should my/our status change I/we will notify BCP accordingly.

I/we confirm that I/we have read and understand the brochure for the BCP Property Value Add Fund. I/we confirm that I/we have received the BCP Client Asset Key Information Document.

I/We confirm that I/we have been provided with the Key Information Document (KID).

INVESTOR/SUBSCRIBER		
FIRST INVESTOR/AUTHORISED SIGNATORY *	SECOND INVESTOR/AUTHORISED SIGNA	ATORY *
SIGNATURE:	SIGNATURE:	
DATE:	DATE:	
*Authorised signatory for, and on behalf of, the Entity described in Section 2		
12 TO BE COMPLETED BY THE INTERMEDIARY		
INTERMEDIARY NAME		
EMAIL		
Client met face to face? Yes No		
Does your client meet all of the Target Market criteria outlined on page 21?	No (please tick as applicable)	
If you have answered 'No' please explain the reason(s):		
A CLASS UNITS 0.5% RENEWAL COMMISSION B CLASS UNITS NO RENEWAL COMM	INITIAL COMMISSION (Deducted from investment amount)	3% OR %
		(Please specify percentage,
P CLASS UNITS (for PRSA Investors only) 0.5% RENEWAL COMMISSION	INITIAL COMMISSION (Deducted from investment amount)	2% OR %
		(Please specify percentage,
SIGNATURE:	NAME:	
DATE:	POSITION:	
For and on behalf of the Intermediary.		

14 CLASSES OF UNITS

- Where your financial advisor has chosen not to take 0.5% renewal commission you will purchase B Class Units.
- P Class Units are for PRSA Investors only. Your financial advisor will receive 0.5% renewal commission.

Please note full details in relation to all Class Units are contained within the Prospectus.

DEFINITIONS

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The Manager: The Manager is Crossroads Capital Management Ltd.

The Investment Manager: The Investment Manager is BCP Asset Management DAC.

The Trustee: The Trustee is Societe Generale Securities Services, acting through its Dublin branch.

The Administrator: The Administrator is Apex Fund Services (Ireland) Limited.

The Fund: The BCP Property Value Add Fund.

The Trust: Means the Unit Trust to be called by the name BCP Investment Fund.

MANDATE FOR CORPORATE, CHARITY INVESTMENTS

At a meeting of the Directors duly convened and	day of		
	(Date) the following resolution	was passed.	
"Resolved that (insert applicant name):			
should invest €	in the BCP Property Value Add Fund and the	following	
are authorised to complete, on behalf of the corthis investment."	npany, the application forms and other documentation	relating to	
Specimen signatures of those authori (Minimum 2 signatories are required):			
NAME	OFFICIAL POSITION	SIGNA	TURE
	o are authorised to apply for and give instructions in relation		
I certify the above to be a true copy of	the Resolution recorded in the minute boo	k.	
SIGNED (Authorised Signatory)			
2.22 (
PRINT NAME			Director/Secretary
DATE			

BCP

Invest with confidence



POLITICALLY EXPOSED PERSON (PEP) OR RELATIVE OR CLOSE ASSOCIATE (RCA) OF A PEP AND OTHER PERSONS OF INFLUENCE

INVESTOR DETAILS

We are obliged under AML legislation to identify PEPs, RCAs and other Persons of Influence.			
APPLICANT A:			
APPLICANT B:			
B PEP\RCA STATUS			
An explanation of PEP and RCA is detailed overleaf			
Are you or any of the Beneficiaries, Trustees, Settlors, Appointers or in the case of a Company Owner, Director, Beneficial Owner (or have been within the last 12 months), a PEP or Relative or Close Associate of a PEP?	Yes	No	
L/Ma are /are a DED:	Yes	No	
I/We am/are a PEP: If you have answered Yes , please provide the details of the prominent public function you perform:	163	140	
I/We am/are a Relative or Close Associate of a PEP:	Yes	No	
If you have answered Yes , please complete below:			
Relationship to PEP:			
Name of PEP: Prominent public function performed by the PEP:			
C OTHER PERSONS OF INFLUENCE			
Do you or any of the Beneficiaries, Trustees, Settlors, Appointers or in the case of a Company Owner, Director, Beneficial Owner hold a prominent position or enjoy a high public profile?	Yes	No	
If you have answered Yes please confirm:			
Name of the person who holds the prominent position			
Please confirm the prominent position held:			
A Senior local or regional public official with the ability to influence the awarding of public contracts	Yes	No	
A decision making member of a high profile sporting body	Yes	No	
An individual that is known to influence the government and other senior decision makers	Yes	No	
Another prominent position (please specify)			
Are you or any of the Beneficiaries, Trustees, Settlors, Appointers or in the case of a Company Owner, Director,	Yes	No	
Beneficial Owner involved in political lobbying?	res	NO	
If you have answered Yes please confirm			
Name of the person involved in political lobbying			
Name of the relevant political lobbying entity			

ROLE DETAILS

Role Options: Beneficiary, Trustee, Settlor, Appointer, Company Owner, Director, Beneficial Owner

For each person for whom you have answered yes to the above question, please complete the following:

FIDST NAME

ROLE	FIRST NAME	LAST NAME	ADDRESS	
Please sign and date.				
SIGNATURE A:			DATE:	
SIGNATURE B:			DATE:	

For and on behalf of applicant

INFORMATION NOTE

Who is a Politically Exposed Person (PEP)?

A "politically exposed person" means any individual, who currently is, or has at any time in the past 12 months, been entrusted with a prominent public function and performs one of the following roles:

- (A) A member of a parliament/member of a legislature or equivalent
- (B) A member of a Supreme Court, Constitutional Court or any other high level judicial body which passes non-appealable verdicts (except in exceptional circumstances)
- (C) A member of a court of auditors or the board of a central bank
- (D) An ambassador, charge d'affairs or high ranking officer in the armed forces
- (E) A member of the administrative, management or supervisory body of a state owned enterprise

Who is a Relative?

- (A) Any spouse of the Politically Exposed Person
- (B) Any person who is considered to be a common law spouse of the politically exposed person under law
- (C) A child of the politically exposed person
- (D) Any spouse of the child of a politically exposed person
- (E) Any parent of the politically exposed person
- (F) Any other family member of the politically exposed person who is of a prescribed class set out by the Department of Finance

Who is a Close Associate?

- (A) Any individual who has a joint beneficial ownership of a legal entity or legal arrangement, or any other close business relations with the politically exposed person
- (B) Any individual who has a sole beneficial ownership of a legal entity or legal arrangement set up for the actual benefit of the politically exposed person