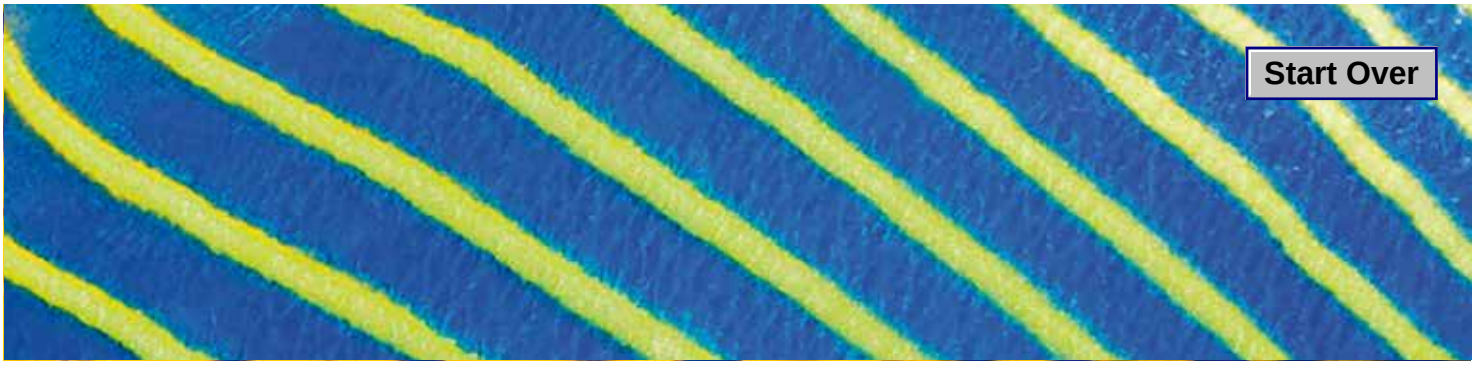

Mariana 10:10 Plan

February 2026

Application form Pension Scheme

Key Dates:
ISA transfer deadline: 28 January 2026
Application deadline: 13 February 2026
Start Level Date: 20 February 2026

Can we help you?

If you or your financial adviser needs help completing the form, please contact our Administrator and Custodian, telephone calls may be recorded.

T 01253 831 165

E Mariana.Applications@jbrearley.co.uk.

Please send completed applications including the required supporting documentation to:

James Brearley, Walpole House, Unit 2, Burton Road, Blackpool, Lancashire, FY4 4NW

Please note that we cannot accept your application unless you have either received financial advice or had the appropriateness of this investment assessed by an FCA regulated financial adviser.

Application Checklist

Please follow the instructions below when completing and submitting your application. Please note these are guidelines only and when the application is received more information may be requested for successful account setup.

Requirements for all applications:

- ☐ Before any business can be accepted a Mariana Terms of Business form must be completed by the financial adviser and submitted to Mariana for approval. (This only needs to be completed the first time a financial adviser submits an application form).
- ☐ Application form must be completed in full, filling in all required fields.
- ☐ Section titled "Financial Adviser Section" must be completed in full by the financial adviser.
- ☐ Funds must be submitted from an account in the client's own name. Funds received from third party accounts cannot be accepted.
- ☐ Funds must be sent to the Administrator and Custodian within the respective deadlines set forth above. The amount sent must match the amount in the application.

Additional Requirements for Pension Scheme applications only:

- ☐ Pension deed (if the underlying client's name does not appear on the pension deed please in addition provide a covering letter or copy of the original application form establishing the relationship between the underlying client and the pension provider/administrator).
- ☐ Authorised Signatory list (If there is no signatory list available please complete section 7).

Mariana

Mariana UFP LLP is authorised and regulated by the Financial Conduct Authority.

Please complete this form using BLOCK CAPITALS and black ink.

Please fill in the name of your financial adviser and firm here:

Financial adviser name:

Financial adviser firm:

Payment information

If you are paying by bank transfer tick here: ☐

Please send the investment amount to the following account:

Account name: JAMES BREARLEY & SONS LIMITED

Bank: Royal Bank of Scotland

Bank sort code: 16 – 14 – 12

Account number: 10504608

Please quote the scheme's name in the reference.

If you are paying by cheque please make it payable to: **James Brearley & Sons Limited.**

Please note that your payment should be made from an account held in the scheme's name. Your application will be rejected if payment is not made from an account held in the scheme's name.

Important: If you do not quote the reference you use when transferring your payment in support of your application it may not be possible to connect your Application Form with your payment and this may lead to your application being rejected. No liability will be accepted where this occurs if you have not quoted a reference number on your payment transfer and on this Application Form.

Section 1 – Scheme Details

Name of Scheme:

Legal Entity Identifier (LEI)*:

LEI expiry date*: D D M M Y Y Y Y

Name of Trustees/Administrators:

Contact Name

Contact Address

Contact Email

Contact Telephone

Beneficial Owner: Full first name(s): Surname:

Date of Birth: D D M M Y Y Y Y National Insurance (NI) Number:

Permanent address
Building name/number:

Street name:

District:

City/Town: County:

Postcode:

Country:

*SSAS APPLICATIONS ONLY. Under new European legislation, the Markets in Financial Instruments Directive (MiFID II) and Regulation (MiFIR) require 'Legal Entities' to obtain a 'Legal Entity Identifier' (LEI). We are unable to process your application without a LEI.

Please provide details of all interests in excess of 25%; if more than one please provide details of each on a separate list or on a photocopy of this page:

Contact telephone number:

Type of pension scheme:

- ☐ An occupational scheme which is not a small self-administered scheme
- ☐ A small self administered scheme (SSAS)
- ☐ A personal pension scheme
- ☐ A self-invested personal pension scheme (SIPP)

HMRC scheme reference number:

Country of incorporation/ establishment:

Section 2 – Your email address

Please provide a valid email address below. If you do not provide a valid email address, you will not be able to access your account through the James Brearley & Sons web portal.

E-mail address:

Section 3 – Investment Amount and Adviser Fees

The minimum investment amount is £10,000.

Deposit Reference/ISIN:	Option 1: **XS3199511059**	Option 2: **XS3199511133**	Option 3: **XS3199511216**
How much money are you sending with this application?	Option 1 £	Option 2 £	Option 3 £
Adviser Fee:	Option 1 £ or %	Option 2 £ or %	Option 2 £ or %
Funding from other James Brearley account(s):	£ Account Number:		
Total Amount you are sending by Cheque or Electronic Funds Transfer:	**£**		
Investments made by bank transfer:	If you are making your investment by bank transfer, please tell your bank or building society to include a reference with the transfer in the format 'MIR' followed by your name. Please enter the reference you used - MIR If you do not include the reference with your transfer it may not be possible to connect your funds with this application and this may delay your application or lead to it being rejected.		

Section 4 – Your Bank Account Details for Payments

Bank/Building Society:

Account name:

Reference or Roll number:

Sort code: – –

Account Number:

Section 5 – Additional anti-money laundering information

Under the rules and guidance of the Financial Conduct Authority, James Brearley & Sons has a regulatory obligation to manage the risk that its business may be used to further financial crime. In order to meet these regulatory obligations certain information is needed from you.

(Please tick as applicable)

Source of funds

*What is the source of the funds being used to support this application?

Trust assets	☐	Personal savings	☐
Estate assets	☐	Property sale	☐
Pension fund	☐	Bequest	☐

other *(please state)*_____

Section 6 – Trustees/Authorised Signatories

The instruction to invest in the Plan under the Terms and Conditions of the Plan must be authorised by the requisite number of authorised signatories set out in the Scheme or, where a number is not stipulated, by at least one authorised signatory. Please provide a list of authorised signatories (a certified true copy if a copy of the list) and their signing authority. If no list is available, please complete the section below.

If there are more than four authorised signatories, please continue on a separate sheet of paper. Where there is a change to the authorised signatories, please notify James Brearley & Sons Limited in writing giving the date of the change. Notice should be sent to Outsourced Administration Services, James Brearley & Sons Limited, PO Box 34, Unit 2 Burton Road, Blackpool, Lancashire, FY4 4WX. James Brearley & Sons Limited will be entitled to rely on any previous list until receipt of notice of a change or a replacement list.

	First Trustee/Authorised Signatory	Second Trustee/Authorised Signatory
Name:		
Date of birth:	D D M M Y Y Y Y	D D M M Y Y Y Y
National Insurance (NI) number:		
Capacity:		
Signature:		
Date:	D D M M Y Y Y Y	D D M M Y Y Y Y

	Third Trustee/Authorised Signatory	Fourth Trustee/Authorised Signatory
Name:		
Date of birth:	D D M M Y Y Y Y	D D M M Y Y Y Y
National Insurance (NI) number:		
Capacity:		
Signature:		
Date:	D D M M Y Y Y Y	D D M M Y Y Y Y

Section 7 – Data Protection

You authorise us to hold and process the information supplied on the application form as a data controller for the purposes of the General Data Protection Regulation (GDPR). We will hold and process information for the administration of this and any future application, for the operation of your investment, for statistical analysis and for marketing goods and services. You also authorise us to transfer information you provide on your application form (or subsequently) to Mariana. They will only use such data for purposes ancillary to their role as Plan Manager, including but not limited to hedge management, dealing with queries, fulfilling their regulatory obligations, statistical analysis and marketing on the Plan's maturity. Your data will be used for no other purposes.

You authorise the disclosure of your information concerning your investment to a financial adviser acting on your behalf. You are entitled to request details of any of your personal data we may hold and to require us to correct any inaccuracies. The Plan Administrator will not send you marketing information.

Declaration and Authority

We, the trustees/authorised signatories, request James Brearley & Sons Limited to arrange for the purchase of the Plan(s) on our behalf.

We declare that:

1. We have full power to invest in the Plan and have taken all necessary action to authorise the making of this application. The person(s) signing this application are authorised to do so on behalf of the Scheme.
2. The Trust/Scheme is a registered pension scheme under Part 4 of the Finance Act 2004 (or an application has been made) and we undertake to advise James Brearley & Sons Limited immediately if it ceases to be a registered pension scheme or if its application for registration is withdrawn or refused.
3. We authorise the Board of the HMRC to tell James Brearley & Sons Limited if the Scheme is not granted exempt approval or if that approval is withdrawn.
4. We authorise James Brearley & Sons Limited to hold the cash subscription, investments, interest, dividends and other rights or proceeds in respect of those investments and any cash or other proceeds.
5. We have read and understood the information contained within the brochure which refers to Counterparty Risk and understand that should the Counterparty fail to meet its obligations to pay us the amount due from our investment, we may not receive back our investment and may not be entitled to any compensation.
6. We have read and understood "Is this investment suitable for you?" and "Risks" and confirm that the terms set out within the brochure are acceptable to us as the investor.
7. We understand that market prices can go down as well as up and we may get back less than our original investment. Past performance is not a guide to future performance.
8. We understand that the extent and value of any tax advantages or benefits arising from the use of tax-advantaged services such as ISAs and SIPPs will vary according to our circumstances. The levels and bases of taxation may also change.
9. We understand that in compliance with the FCA rules, telephone calls will be recorded.
10. We understand that early encashment is likely to lead to some loss of capital.
11. We are not acting on behalf of a resident of the United States or a U.S. Person (as defined under the Internal Revenue Code of 1986, as amended) and we will not assist any person who is resident in the United States or a U.S. Person to acquire an interest in the Trust/Bond. We agree to inform you immediately should we believe anyone connected with the trust becomes a resident of the United States or a U.S. Person.
12. We are not acting on behalf of a person who is in the United States or who is a U.S. Person (as defined in Regulation S under the U.S. Securities Act of 1933, as amended).
13. We undertake to advise James Brearley & Sons Limited immediately in writing of any changes in the information contained in this application form including any changes to the Trustees/authorised signatories.

We have read and understood the relevant Key Information Document (KID) and the Plan brochure including the Terms & Conditions and accept the terms under which the Investment will be managed. We are not prohibited under the provisions or the terms of the Trust/Scheme from investing in this Plan. We declare that this application form has been completed to the best of our knowledge and belief. We understand that the producers of this brochure have not provided investment advice and confirm that we are making this application through a financial adviser (and have taken taxation advice if appropriate) and we wish to make this investment.

Signed for and on behalf of the Trustees of the Scheme:

	First signature:	**Second signature:**
Signature:		
Print name:		
Date:	D D M M Y Y Y Y	D D M M Y Y Y Y

Section 8 – Financial Adviser Section (Financial Adviser use only)

Please ensure you have completed, signed and returned a Mariana Terms of Business. A copy can be downloaded from our website at www.marianainvestments.com.If a Mariana Terms of Business Form has not been completed and approved, we will be unable to process any applications.

Name of adviser:

Name of company:

Address:

Telephone number:

Email address:

Are you a member of a network or directly authorised?

Please tick as appropriate.
Network ☐ Directly authorised ☐

If you have selected network, please state which network:

Your FCA (or equivalent) registration number:

Have you identified the investor as a vulnerable client

Yes ☐ We have omitted the "no" tick box as we will assume if not ticked the client is not identified as vulnerable.

Does the investor fall within the target market established in the adviser guide?:

Yes ☐ No ☐

If no, please outline your rationale for submitting an application on behalf of an investor falling outside the target market:

Suitability (For Advised applications only)
Please confirm that you have provided a copy of this Plan's Key Information Document (KID) and brochure and disclosed the associated risks of this Investment and that you have conducted the required suitability assessment and that you consider this product to be suitable for your client.

Appropriateness (For Execution Only applications)
Please confirm that you have provided a copy of this Plan's Key Information Document (KID) and brochure and confirmed the appropriateness of this investment and that you consider this product to be appropriate for your client.

Verification of Identity
Please be aware that we have obligations under UK Anti Money Laundering (AML) regulations and reserve the right to request further evidence of identity so as to be able to fulfil these requirements. Depending on the circumstances, where we consider we have not been able to fulfil these obligations, we may decide not to proceed with an application.

Please advise on what basis this application has been submitted and only tick **one** of the boxes:

☐ Advised
☐ Execution Only

Adviser Declaration:

I confirm that all dealings with the investor have been carried out in accordance with the requirements of the FCA Handbook and in accordance with my obligations under Mariana/JBS' current Terms of Business.

I acknowledge my responsibility to evaluate all information on the Plan and confirm that where I have given advice, I have the necessary knowledge and experience to be deemed competent to assess the Plan and its suitability to an applicant's circumstances and investment objectives.

I declare that this application has been completed to the best of my knowledge and belief and I have agreed any adviser charge with the applicant.

I confirm that I have carried out the appropriate identity checks on all the parties relevant to this application and have retained copies of the completed Verification of Identity Certificates and supporting documents, which I understand JBS may request at any time and may rely on.

Signature:

Date: D D M M Y Y Y Y

Mariana UFP LLP
100 Cannon Street
London EC4N 6EU
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T +44 (0) 20 7065 6600
F +44 (0) 28 7744 0979
E enquiries@marianainvestments.com
www.marianainvestments.com
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