

**7 Declaration & Authority**

**Applicable to Direct Investment Applicants only**

I declare I am 18 years of age or over and that I am not a resident, nor am I acting on behalf of, a resident of the United States; and that I will not assist any person who is so resident to acquire shares in Sienna Investment Company Limited. Further I agree to inform you immediately should I become a resident of the United States.

**Applicable to all ISA Applicants**

**I declare that:**

1. All subscriptions made, and to be made, belong to me;
2. I am 18 years of age or over;
3. If I am applying for a 2002/03 Maxi ISA; I have not subscribed and will not subscribe to another ISA other than a TESSA only ISA in the same year that I subscribe to this ISA. If I am applying for a 2003/04 Maxi ISA, I have not subscribed and will not subscribe to another ISA, other than a TESSA only ISA, in the same year that I subscribe to this ISA;
4. I am resident and ordinarily resident in the UK for tax purposes, or non-resident but performing duties which by virtue of section 132(4)(a) of the Income and Corporation Taxes Act 1988 are treated as being performed in the UK, or I am married to a person who performs such duties and that I will immediately inform Morgan Stanley & Co. International Limited if I cease to be so resident and ordinarily resident or to perform such duties, or be married to a person who performs such duties.

**For all Applicants**

**I authorise Morgan Stanley & Co. International Limited:**

1. To hold my cash subscription, Direct investments, ISA investments, (as applicable), interest, dividends and other rights or proceeds in respect of those investments and any cash or other proceeds;
2. To make on my behalf any claims to relief from tax in respect of ISA investments;
3. On my request to transfer or pay to me, as the case may be, Direct investments, ISA investments, interest, dividends, rights or other proceeds in respect of such investments, any cash or other proceeds and;
4. To supply an annual statement.

**I have read and understood the Morgan Stanley FTSE™ Optimiser brochure containing the Key Features and Terms & Conditions and I understand that the Prospectus on which the shares of the company are issued is available on request. I acknowledge and agree to the terms under which my investments will be managed. I understand that Morgan Stanley does not provide investment advice in relation to the Plan and confirm that I either do not require such advice or have received advice on the Plan from an Independent Financial Adviser. I declare that this application form has been completed to the best of my knowledge and belief.**

Signature	X
Date	

**Joint holder if applicable (Direct Investment only):**

Signature	X
Date	

Investors should be aware that the value of investments and the income from them can fall as well as rise, and that past performance is not necessarily a guide to the future performance.

**Notes:** When completed this application form should be returned to your financial adviser.

**MONEY LAUNDERING REGULATIONS 1993:** Under the regulations, there is a legal requirement to prove the identity of people who wish to make an investment. You may therefore be asked for some evidence of your identity. This will normally be a passport or similar form of identity check together with proof of address from a gas bill, electricity bill or similar.

Morgan Stanley & Co. International Limited will store information that we hold about you for administration and marketing. We may contact you about our services, and the services of companies with whom we have a relationship, in the future.

If you would prefer not to receive such information please mark this box.

The interim value of the underlying assets of the Plan do not directly impact the benefits generated. Hence, the periodic statement shall be issued on an annual basis and not more frequently.

Issued by Morgan Stanley & Co. International Limited, which is regulated by the Financial Services Authority.

**Financial Adviser Details**

Financial Adviser:	
FSA Number:	

**Money Laundering**

I confirm that I have completed the appropriate verification of identity checks and attach the Verification of Identity Certificate. Either certified copies of the underlying documentary evidence received or a certified note of the reference numbers and other details of the evidence obtained are enclosed with this certificate. I have sighted the original documents and confirm that any requiring a signature were pre-signed.

Financial Adviser Signature:

OFFICE USE ONLY	Client ref: <input type="text"/>	Checked by <input type="text"/>
	Deal ref: <input type="text"/>	

Morgan Stanley Quilter Contact <input type="text"/>
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This form allows you to make up to two transfers. Should you require further copies of the mandates below to facilitate additional transfers you may photocopy this form.

I confirm that I wish to transfer a PEP  Single Company PEP  Maxi ISA  Mini ISA  (Please tick one only)

Please complete in block capitals

### 1 Personal Details

Title : (Mr/Mrs/Miss/Ms/Other) <input type="text"/>	Telephone <input type="text"/>
Surname <input type="text"/>	E-mail Address <input type="text"/>
First name(s) in full <input type="text"/>	Do you have a National Insurance (NI) Number? <input type="text"/>
Date of Birth <input type="text"/> - <input type="text"/> - <input type="text"/>	If 'Yes' you must enter it here: <input type="text"/>
Permanent Residential Address <input type="text"/>	(You should be able to find your NI Number on a payslip, form P45 or P60, a letter from the DSS, or pension order book) If you have never been issued with a National Insurance Number, please tick here <input type="checkbox"/>
Postcode <input type="text"/>	Please ensure that you sign the legal declaration in Section 4.

### 2 Optimiser Options

Please tick the option you require

Option 1  Option 2  Option 3  Option 4

### 3 Income and growth payment options

If you have selected Option 1 or 2, tick one of the following:

Annual Income  Quarterly Income  Growth

### 4 Income Payment Options

All income payments can only be made via the Bankers Automated Credit System (BACS) to an account within the UK clearing system. **Accordingly please complete the details below if you have chosen the Income Option and ensure that they are correct.**

Bank/Building Society

Address <input type="text"/>
Postcode <input type="text"/>
Account Name <input type="text"/>
Account Number <input type="text"/>
Bank Sort Code <input type="text"/>
Building Society Reference or Roll Number (if applicable) <input type="text"/>

Please do not detach

### 5 Existing ISA / PEP transfer request mandates

**First Mandate – Instruction to the Plan Manager from whom you are transferring your PEP/ISA (delete as appropriate)**  
I hereby instruct you to sell investments within my plan immediately and transfer the cash proceeds, together with any interest, dividends, rights and any other cash within my Plan (less any amount you are entitled to keep under the terms of the Plan), to **Morgan Stanley & Co. International Limited, Administration Office, Floor 8, Fountain House, 2 Queens Walk, Reading RG1 7QF.** Please transfer my Plan once instructions have been received from **Morgan Stanley & Co. International Limited** to do so. After transfer, all dividends and tax credits due should be made payable directly to me. If you are not in a position to transfer my cash proceeds by 22 April 2003, please cancel my request to transfer and reinstate my PEP/ISA.

Title (Mr/Mrs/Miss/Ms/Other) <input type="text"/>
First name(s) in full <input type="text"/>
Surname <input type="text"/>
Address <input type="text"/>
Postcode <input type="text"/>
Telephone <input type="text"/>
Signature <input type="text"/>
Date <input type="text"/>

**Second Mandate – Instruction to the Plan Manager from whom you are transferring your PEP/ISA (delete as appropriate)**  
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Financial Adviser Signature:

This completed application, cheque and the Verification of Identity Certificate should be returned to Morgan Stanley & Co. International Limited, Administration Office, FTSE Optimiser Offer, Floor 8, Fountain House, 2 Queen's Walk, Reading, RG1 7QF

Please do not detach

**Existing ISA/PEP transfer request mandates (continued)**

Name of Plan Manager	
Address of Plan Manager	
	Postcode
Account Number	
Type of Account*	Approx.Value
Account Number	
Type of Account*	Approx.Value
Account Number	
Type of Account*	Approx.Value
*Type of account e.g. Maxi ISA/General PEP/Single Company PEP Minimum aggregate transfer value £7,000	

Name of Plan Manager	
Address of Plan Manager	
	Postcode
Account Number	
Type of Account*	Approx.Value
Account Number	
Type of Account*	Approx.Value
Account Number	
Type of Account*	Approx.Value
*Type of account e.g. Maxi ISA/General PEP/Single Company PEP Minimum aggregate transfer value £7,000	

