APPLICATION FORM NO .....

**SOLOMON Stockbrokers Limited** PSSSF House, Ground Floor

APPLICATION FOR SUBSCRIPTION OF SHARES FOR JATU PLOGRAM

JATU PLC

CSD ACCOUNT NO.

| In respect of an Initial Public Offering (IPO) of 15,000,000 new | ordinarishares of paturec/0714 26909  |
|--|---------------------------------------|
| COMPLETE IN CAPITAL LETTER                                       | Email: solomonstockbrokers@solomon.co |

AUTHORISED COLLECTING AGENT NO.

| В                                 | COMPANY<br>DETAILS:             |                          |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
|-----------------------------------|---------------------------------|--------------------------|-----------------|----------------------------|---------|--|--------|--------|----------|-------------|-----|---|-------------|-------------------|----------|------|---------|-------|-----|--|----------|--|--|--|
|                                   | Company                         |                          |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
|                                   | Name Account                    |                          |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
|                                   | no                              |                          |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
| С                                 | APPLICANT(S)                    |                          |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
|                                   | AFFLICAIVI(3)                   |                          | Firs            | t nam                      | е       | Mid  | dle n  | ame    |          | Surr        | nam | e |             |                   |          |      |         |       |     |  |          |  |  |  |
|                                   | Primary applicant               |                          |                 |                            |         |  |        |        |          |             |     |   | Nationality |                   |          |      |         |       |     |  |          |  |  |  |
|                                   | Joint applicant-1               |                          |                 |                            |         |  |        |        |          |             |     |   |             | Nationality       |          |      |         |       |     |  |          |  |  |  |
|                                   | Joint applicant-2               |                          |                 |                            |         |  |        |        |          |             |     |   |             | Nati              | ona      | lity |         |       |     |  |          |  |  |  |
|                                   | Cooperative applica (Name)      | nt                       |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
|                                   | Registration no.                |                          |                 | (                          | Coun    | try of                                       | regist | tratio | n        |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
|                                   | Contacts                        |                          |                 | . Вох                      |         |  |        |        |          | Tel         |     |   |             | E                 |          |      |         | Email |     |  |          |  |  |  |
|                                   |                                 |                          | P.O.            | . Вох                      |         |  |        |        |          | Tel         |     |   |             | Ema               |          |      |         |       | ail |  |          |  |  |  |
| D                                 | APPLICATION                     |                          |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
|                                   | No of share applied             | for                      |                 |                            |         | nt payable Tsh<br>er of shares X Offer price |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
| E                                 | PAYMENT (please                 | e tick ap                | prop            | riate b                    | ox)     |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
|                                   | Electronic                      |                          |                 | Mob                        | ile tra | ansfer                                       | -      |        | Sender's |             |     |   |             |                   | phone no |      |         |       |     |  |          |  |  |  |
|                                   | Banker's check no;/Ref No       |                          |                 | Company Guaranteed (State) |         |  |        |        |          |             |     |   |             |                   |          | e)   |         |       |     |  |          |  |  |  |
|                                   | I/We the app<br>on th           | olicant(s)<br>ne basis o |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  | !S       |  |  |  |
| F                                 |                                 | TURE                     | RES Signature 1 |                            |         |  |        |        |          | Signature 2 |     |   |             |                   |          |      | Signatu |       |     |  | <u> </u> |  |  |  |
| Signed                            |                                 |                          |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
| Date                              | Date (DD/MM/YR)                 |                          |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
|                                   |                                 | •                        |                 |                            |         |  |        |        |          |             |     | • |             |                   |          |      |         |       |     |  |          |  |  |  |
| ΔΡΟΙ                              | LICATION FORM NO:               |                          |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
|                                   | CUSTOMER RECEIPT Payment Ref.No |                          |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |
|                                   | ne of applicant                 |                          |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       | Π   |  |          |  |  |  |
| (First /middle/last) name  CSD No |                                 |                          |                 |                            |         | +  |        |        |          | c           |     |   |             | nares applied for |          |      |         |       | _   |  |          |  |  |  |
|                                   | e (DD/MM/YR)                    |                          |                 |                            |         | +  |        |        |          |             |     | + |             |                   | ~~       |      |         |       | -   |  |          |  |  |  |
| Receiving Agent                   |                                 |                          |                 |                            |         |  |        |        |          |             |     | 9 | Signo       | atur              | e & .    | Stan | пр      |       |     |  |          |  |  |  |
|                                   |                                 |                          |                 |                            |         |  |        |        |          |             |     |   |             |                   |          |      |         |       |     |  |          |  |  |  |