

APPLICATION FORM

Application List Opens
20 May 2026

Application List Closes
11 June 2026

LEAD ISSUING HOUSE



Rc 739441

JOINT ISSUING HOUSES



Rc 1517636



Rc 1484102



ON BEHALF OF



Rc 6126

OFFER FOR SUBSCRIPTION OF 5,468,750,000 ORDINARY SHARES OF 0.50 KOBO EACH AT ₦3.20 PER SHARE

PAYABLE IN FULL ON APPLICATION

Applications must be in accordance with the instructions set out in the Prospectus. Care must be taken to follow these instructions as applications that do not comply may be rejected. Before subscribing, please contact your Stockbroker, Solicitor, Banker or an independent investment adviser registered by the Securities and Exchange Commission, for guidance.

Guide to Application	Amount Payable
Minimum Number of Shares	₦[*]
1,000 minimum	₦[*]
Subsequent multiples of 500	₦[*]

D	D	/	M	M	/	Y	Y	Y	Y
CONTROL NO. (for Registrars' use only)									

DECLARATION	
<input type="checkbox"/>	I/We am/are 18 years of age or over
<input type="checkbox"/>	I/We note that allotment will only be electronically to the CSCS accounts of allottees and no physical share certificate would be issued
<input type="checkbox"/>	I/We note that International Energy Insurance Plc and the Issuing Houses are entitled in their absolute discretion to accept or reject this application
<input type="checkbox"/>	I/We attach the amount payable in full on application for the number of ordinary shares in International Energy Insurance Plc
<input type="checkbox"/>	I/We agree to accept the same or any smaller number of units in respect of which allotment may be made upon the terms of the Prospectus
<input type="checkbox"/>	I/We declare that I/we have read a copy of the Prospectus, issued by the Issuing Houses on behalf International Energy Insurance Plc

PLEASE COMPLETE IN BLOCK LETTERS

APPLICATION DETAILS	
NUMBER OF SHARES APPLIED FOR:	VALUE OF SHARES APPLIED FOR / AMOUNT PAID:
<input type="text"/>	<input type="text"/>

INVESTOR DETAILS (INDIVIDUAL / CORPORATE)	
TITLE	MR <input type="checkbox"/> MRS <input type="checkbox"/> MISS <input type="checkbox"/> OTHERS (PLEASE SPECIFY) <input type="text"/>

SURNAME / CORPORATE NAME (AS REFLECTED ON CSCS STATEMENT)

FIRST NAME (FOR INDIVIDUALS ONLY) OTHER NAMES (FOR INDIVIDUALS ONLY)

FULL POSTAL ADDRESS (PLEASE DO NOT REPEAT APPLICANT NAME) POST BOX NO. ALONE IS NOT SUFFICIENT

CITY/TOWN STATE COUNTRY

PHONE NUMBER

E-MAIL ADDRESS

NEXT OF KIN (FOR INDIVIDUAL APPLICANTS ONLY) / CONTACT PERSON (CORPORATE ONLY)

CHN NUMBER (CLEARING HOUSE NUMBER) CSCS NUMBER

NAME OF YOUR STOCKBROKER MEMBER CODE