

SHARE APPLICATION FORM

For the public offer of 753,308,604 Ordinary Shares of Continental Holdings PLC at MWK195 per Ordinary Share
Offer opens 30 June 2026 at 09:00 and closes on 20 July 2026 at 17:00



Continental Holdings PLC ("CHL" or "the Group") (formally Continental Holdings Limited)
Incorporated in Malawi on 18 May 2009 with Registration Number: 9985

Please read the Prospectus including the Terms and Conditions of the Offer and refer to the guide on the reverse side before completing this form. The form should be correctly completed in CAPITALS and all fields must be completed. Incomplete or erroneously completed applications may be rejected

Applicant's declaration to the Directors of CHL

I/We hereby declare that I/we have read and understood in full (a) this Application Form including the instructions on the reverse side of this form (b) the Terms and Conditions of the Offer and (c) the Prospectus which was prepared and published by the Group in relation to the IPO. I/We understand that this is the Application Form referred to in the Prospectus. In particular, I/we do hereby accept the Terms and Conditions set out in the Prospectus pertaining to the IPO and declare that all details and statements made by me/us on this Application Form are complete and accurate.

Signatures:**Date:****Assisted by (in case of minors):**

Application Type (Tick the appropriate one):	Individual	Joint Individuals	Corporate	Other (Specify:)
--	------------	-------------------	-----------	------------------

1. APPLICANT DETAILS

Title(s) circle appropriate title(s), or fill in the blank if not listed:	Dr	Mr	Mrs	Miss	Rev	Other (specify):
Name of Applicant:	First Name		Other Names		Surname	
Identification Details (Choose one):	National ID Number		Passport Number		Other ID	
Nationality:						
Date of Birth:	Day		Month		Year	
Legal Name of Applicant (if a Corporate or Other Entity):	Name				Registration Number	

Postal Details	
Email Address	
Phone Number	
Physical Address	

2. APPLICATION FOR SHARES (NOTE: Minimum of 300 shares are to be applied for and thereafter in multiples of 100 shares)

Number of Shares Applied for (in figures)	Total Amount Payable (in Figures)	Total Amount Payable (in Words)

3. APPLICANT'S ACCOUNT DETAILS (in the event of a refund due to you, the refund will be sent to the account details here)

Account Details of Applicant	Bank Name	Branch name	Account Name		Account Number
Mode of payment for Shares (Tick appropriate box)	Cash	Banker's cheque	Bank Draft	Electronic Transfer	Internet Banking/Mobile Money

4. PREFERRED BROKER (Tick the box next to your preferred broker)

Continental Capital Limited	<input type="checkbox"/>	Cedar Capital Limited	<input type="checkbox"/>
	<input type="checkbox"/>	Stockbrokers Malawi Limited	<input type="checkbox"/>

5. CSD ACCOUNT NUMBER DETAILS

CSD Number	
------------	--

Please fill in CSD Form 1 to accompany this Application Form if you do not have a CSD account

GUIDE TO THE APPLICATION FORM

You should read the Prospectus carefully including the Terms and Conditions of the Offer before completing this Application Form.

Instructions:

Please fill out all relevant fields of the Application Form in CAPITAL LETTERS.

Write your full name. Initials are not acceptable for first name and surname of individual applicants. The application must be in the name of natural persons, companies or other legal entities acceptable to the Group. At least one full given name and surname is required for each natural person.

Insert the number of shares that you wish to apply for (not less than 300 shares and in multiples of 100 shares thereafter). Insert the corresponding amount payable for shares applied for in words and figures under Section 2 "Application for Shares". An illustrative number of shares applied for and corresponding monies:

No. of shares	Application monies (MWK)	No. of shares	Application monies (MWK)	No. of shares	Application monies (MWK)
300	58 500	3 000	585 000	10 000	1 950 000
500	97 500	3 500	682 500	20 000	3 900 000
1,000	195 000	4 000	780 000	30 000	5 850 000
1,500	487 500	4 500	877 500	40 000	7 800 000
2,000	390 000	5 000	975 000	50 000	9 750 000

Enter your contact details including: postal address mobile phone number and email address for all correspondence regarding your Application Form or Application Monies or other correspondence in regards to this IPO. All communications to you from the Company will be mailed to the person and address shown on the Application Form. For joint applicants, only one address should be included.

Ensure that you provide your correct CSD account number. If you do not have a CSD account number complete the CSD Form 1, clearly indicating your preferred broker in order to have a CSD account number created for you. Shares that may be allotted to you at the end of the IPO will be credited to this CSD account.

Provide your ID details, preferably the Malawi national ID number or at least a passport number as these are key for the creation of your CSD account number (if you do not have a CSD account already). Applicants without a CSD account and Applicants who do not submit a duly completed CSD form will be provided with physical share certificates indicating their share allotment

Insert your correct account details for purposes of refund of a portion of the monies you paid for the shares in the event of an undersubscription but also for purposes of payment of any dividends in future.

Payments should be made to the following bank account **for investors within Malawi:**

Bank Name	CDHIB	FCB	FDH	NBM	NBS	Standard Bank
Account number:	0020133732202	0003707001934	1850105908293	1014692971	25163307	9100009026727
Account name:	CHL IPO	CHL IPO	CHL IPO	CHL IPO	CHL IPO	CHL IPO
Branch:	Blantyre Banking Centre	Blantyre	Umoyo House	Victoria Avenue	Ginnery Corner	Blantyre
Contact name:	James Chikoti	Adrian Chaguluka	Anthony Masamba	Edda Khulamba	Susan Mkangama	Wilson Kuyokwa
Contact email:	jchikoti@cdh-malawi.com	Adrian.Chaguluka@firstcapitalbank.co.mw	AMasamba@fdh.co.mw	ekhulamba@natbankmw.com	susan.mkangama@nbs.mw	Wilson.Kuyokwa@standardbank.co.mw

Submission of the Application Forms

Submit your Application Form accompanied by payment for the shares applied for at any Receiving Bank Branch or agency near you.

Details of Receiving Banks and respective branches

CDHIB

Blantyre Lilongwe (City Centre) Lilongwe (City Hall)

FCB Agencies

Area 25 Dwangwa Kasungu Mchinji Mzimba Salima
 Chichiri Gateway Mall Likuni Mitundu Ndirande
 City Mall Kanengo Liwonde Mponela Nkhata Bay
 Dedza Karonga Mangochi Mulanje Rumphu

FCB Branches

Blantyre
 Capital City
 Lilongwe
 Mzuzu
 Zomba
 AREA 2
 Limbe

FDH Bank

Bvubwe Chilumba Goliati Liwonde Mponela Neno Ntcheu Rumphu
 Balaka Bwaila Chiponde Jenda Luchenza Mulanje Nkhatabay Ntchisi Salima
 Bangula Chichiri City Centre Kanengo Lunzu Mwanza Nkhotakota Old Town Thyolo
 BICC Chikwawa Dowa Kasungu Mangochi Mzuzu Nsanje Phalombe Umoyo
 Blantyre Main Chiladzulu Gateway Limbe Monkeybay Nchalo Ntaja Raiply Zomba

NBM

Balaka Chitipa Henderson Street Kasungu Mangochi Mwanza Ntcheu Thyolo
 Chichiri City Center Kamuzu International Airport Lilongwe Mchinji Mzumba Salima Top Mandala
 Chichiri Shopping Mall Customs Road Kanengo Lilongwe Getway Mponela Mzuzu Songwe Victoria Avenue
 Chileka Airport Dwangwa Karonga Liwonde Mulanje Nchalo Ntcheu South End Zomba

NBS

Chichiri Mall
 Balaka Dedza Kanengo Lilongwe Mangochi Mzimba Nkhatabay Rumphu
 Blantyre Dwangwa Karonga Limbe Mchinji Mzuzu Nkhotakota Salima
 Capital City Ginnery Corner Kasungu Liwonde Mulanje Nchalo Ntcheu Zomba

Standard Bank

Blantyre Corporate Banking Centre City Mall Bwaila Dedza Karonga Mwanza Ntcheu
 Chichiri Limbe Gateway Mall Mponela Mangochi Kasungu Mzuzu Salima
 Ginery Corner Capital City Kanengo Balaka Dwangwa Luchenza Mzimba Zomba



Reserve Bank of Malawi

SECURITIES ACCOUNT OPENING FORM (CSD)

To be completed in BLOCK LETTERS
APPLICANT PARTICULARS

For Individuals

Full Name..... Gender: Male: Female:

ID Type*..... ID Number*.....Date of Birth*.....

Foreign/Local Investor*.....

For Joint Applicants

Full Name..... Gender: Male: Female:

ID Type*..... ID Number*.....Date of Birth*.....

Foreign/Local Investor*.....

For Companies/Institutions:

Company Name: Registration Number*.....

Date of Registration.....

Physical Address* Postal Address:

.....
.....
.....
.....

Telephone*..... Cellphone*..... Fax:.....

Email Address*.....

CSD FORM F1

Authorised Signatories:.....

NB (*) Denotes required/mandatory fields. Completed forms must be accompanied by certified copy of ID Document & two (2) passport size photos

Dividend Disposal Instruction

Bank Name: Bank Branch Code: Account Number:

Account Name:

DECLARATION

I/We hereby request you to open and maintain a Securities Account in the Central Securities Depository (CSD) in my/our name(s).
 I/We hereby represent and warrant that I/We have good title to such securities that may be held in my/our Securities Account from time to time.
 I/We affirm that the funds to be used for the purchase of Securities through my/our Securities Account will not be funds derived from any money laundering activity or funds generated from terrorist or any other illegal activity.
 I/We hereby confirm that the undersigned Participant has full authority to intermediate and or conduct business on with the Depository on our behalf in keeping with CSD Rules and Procedures that may be in force from time to time.
 I/We agree to be bound by the terms and conditions articulated by the CSD Rules including any procedures and any other instructions.
 I/We undertake to notify the under mentioned Participant of any change of particulars or information provided by me/us in this form.

BROKER CONTROLLED ACCOUNT - STOCKBROKERS MANDATE

I/We hereby confirm that I/we appoint to manage my/our CSD Securities Account on our behalf, in accordance with the Terms and Conditions of the Depository in force from time to time". We understand that will be responsible for execution of our trade orders at the Malawi Stock Exchange ("MSE") and recording them on the CSD System while RBM or its agents will be responsible for managing both our cash & scrip settlements on the CSD System. We understand that CSD settlements once confirmed are irrevocable and irreversible and we indemnify against any losses arising as a result of these transactions. No responsibility will be accepted for any errors, omissions or delays in transmissions arising from circumstances beyond the control of

Primary Applicant Signature: Date:

Joint Applicant Signature: Date:

FOR PARTICIPANT USE ONLY	FOR CSD USE ONLY	
Declaration:	Approved	Declined
We, the undersigned undertake that we have checked the accuracy of the Documents submitted with this application.		
Verified By: _____	Approved By: _____	
Signature: _____	Signature: _____	
Securities Account Number: _____	_____	
Account Code: _____		

For Official Use