Equity Partners Infrastructure Company No.1 Limited ACCEPTANCE FORM

This acceptance form must be completed and returned to the address set out in the Offer letter by 5:00 pm on 22 December 2014 to participate in the Offer. If you do not wish to sell any of your shares in the Offer, do not complete or return this form.

			S	Shareholder No: X012345
[Shareholder name and address] [Address line 2] [Address line 3] [Address line 4] [Address line 5] [Address line 6] Contact phone number:			Number of shares held as at 4 December 2014: XX,XXX	
PART	TICIPATION IN THI	E OFFER		
Please w	write the total number of share	es you wish to se	ll in Box 2.	2
PAYN	MENT			
	To be paid in NZD - New Zealand dollar bank account details			
	Name of Bank:			
3a	Account Holder Name:			
	Bank Branch No. Account No. Suffix			
	To be paid in GBP - GBP bank account details Please include full details including name of bank, account number and sort code (or equivalent) to enable transfer to be made.			
3 b				
Execute	HERE TO PARTICE and and delivered as a deed by:			sed by:
Sig	gnature of shareholder	Date	Signature of witness	Name and address of witness
indicated		power of attorney,	the attorney must sign this Acce	o sign and print his or her name and addres ptance Form and the original power of attorr
(b) E2	xecution by a company			
Co	ompany name:		Date:	
<u>G.</u>			<u> </u>	and discourage and the second
518	gnature of director		Signature of second director or witness	

Name of director

Name of second director, or name, address and

occupation of witness