



**Application for the allocation of increased voting rights (the "List") pursuant to Article 127-  
quinquies of Legislative Decree no. 58 of 24 February 1998**

To be sent to **Ascopiave S.p.A. (the "Company")**

Via the Intermediary using one of the following certified e-mail addresses:

ascopiave@pec.ascocert.it and emittenti@pec.spafid.it.

**Identification data for registration on the Voting Right Holder's List (the "Applicant"):**

surname or company name

name

tax code

municipality of birth

province of birth

date of birth (dd/mm/aa)

nationality

residence or registered office

city

State

e-mail address

Telephone no.

**Identification data of the party controlling the Applicant:**

*(only if the Applicant is a legal person or entity lacking legal personality subject to direct or indirect control)*

Surname and name or company name

tax code

residence or registered office

**Right in rem legitimizing the ownership of voting rights:** (tick the relevant box)

<input type="checkbox"/> ownership	<input type="checkbox"/> bare ownership	<input type="checkbox"/> beneficial interest
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**Shares for which registration on the List is requested:**

No. of shares

Applicant's account no.

Intermediary depositary

**Applicant's statement**

The Applicant, (i) **declares to have taken note** of the specific terms and conditions that the Issuer has established in the Bylaws and/or in the implementing regulation for the purpose of allocation, maintenance, loss and eventual waiver of increased voting rights, (ii) **declares** to have full formal and substantial ownership of the right to vote for the shares for which entry in the List is required by virtue of a legitimizing right in rem and (iii) **undertakes** to perform any reporting or additional obligation envisaged by the Bylaws and/or by the implementing regulation in order to register the shares on the List as well as ascertain the conditions for allocation, maintenance and loss of the increased voting right.

**Date**

**The Applicant**

*(if the person signing the entry request acts on behalf of the holder of the voting right indicated above, indicate the personal details and the quality of the signatory)*

surname and name

municipality of birth

date of birth (dd/mm/yy)

in the quality of