



Application for  
Clearing Member Status

## APPLICATION DOCUMENTATION

Please use the checklist below to ensure that you have included all the required documents with this application form. Please note that English versions of all supporting documentation is required.

|   |  |  |
|---|--|--|
| a.  | Memorandum and Articles of Association (or equivalent)   |  |
| b.  | Certificate of Incorporation / Partnership Agreement (or equivalent)   |  |
| c.  | Non-consolidated audited accounts of applicant (for the previous three years)  |  |
| d.  | Most recent management (signed) accounts or return to applicant's regulatory body / bodies   |  |
| e.  | Most recent audited accounts of ultimate parent company  |  |
| f.  | Corporate tree (group structure)<br>If a corporate tree is not available, a listing of all the applicant's major shareholders, partners and subsidiaries should be provided. |  |
| g.  | Evidence of authorised signatories   |  |
| h.  | LCH.Clearnet Limited Documentation (as outlined in the covering email)   |  |
| If the applicant is a newly incorporated company the following should also be included: |  |  |
| i.  | Evidence of issue of shares  |  |
| j.  | Audited pro forma balance sheet  |  |
| If the applicant requires a guarantee the following should also be included:            |  |  |
| k.  | Audited accounts (for previous three years) of parent/affiliate providing the guarantee  |  |
| l.  | Legal opinion and board minute in support of the guarantee   |  |

If you would like to discuss your application for Clearing Member status in more detail, please contact the Membership Team by:

- Telephone: +44 (0) 20 7426 7627 / 7063 / 7521 / 7968
- Email: [membershipteam@lchclearnet.com](mailto:membershipteam@lchclearnet.com)

Membership Team  
LCH.Clearnet Limited  
Aldgate House  
33 Aldgate High Street  
London  
EC3N 1EA

Date:  /

We hereby apply to be approved as a Clearing Member of LCH.Clearnet Limited (the Clearing House), in accordance with the Clearing House's Rulebook and set out below the following information for the Clearing House's consideration.

### 1. APPLICANT INFORMATION

|                                   |
|-----------------------------------|
| 1.1 Applicant's name and address. |
| Name of Applicant:                |
| Address of Registered Office:     |
| Postcode:                         |
| Website Address:                  |

|   |
|---|
| 1.2 Address where operations will be based if different from Registered Office* |
| Address:  |
| Postcode:   |

\* Please note that all Clearing Members will be charged VAT (on applicable markets) unless they specifically state in writing that their operations do not belong in the UK (see HMRC Notice 741 - Place of supply of services - March 2002). Therefore all non-UK Clearing Members must provide this declaration.

|   |
|---|
| 1.3 Address for service of legal documentation, if different from Registered Office. Non-UK registered companies must state a UK address. N.B. This address cannot be changed without prior approval from the Clearing House. |
| Address:  |
| Postcode:   |

|   |
|---|
| 1.4 Date and place of incorporation / establishment of partnership. |
| Date:   |
| Place / Country:  |
| Registered No:  |
| Form of incorporation (e.g. limited, unlimited, other):             |

|  |
|--|
| 1.5 Principal Activities. Please include details regarding type of business, planned clearing activity (e.g. contracts, anticipated volumes) and client profile/number of clients, together with future plans for clearing (attach additional pages if necessary): |
|--|

## 2. AUDITORS AND BANKERS

|                                    |  |
|------------------------------------|--|
| 2.1 Auditor's name and address.    |  |
| Name:                              |  |
| Address:                           |  |
| Postcode:                          |  |
| Contact Name and Telephone Number: |  |

|   |  |
|---|--|
| 2.2 Banker's name and address (not applicable if the applicant is a bank entity). |  |
| Name:   |  |
| Address:  |  |
| Postcode:   |  |
| Contact Name and Telephone Number:  |  |

|   |  |
|---|--|
| 2.3 Name of proposed Protected Payments System (PPS) banks. |  |
| UK  |  |
| US  |  |

For a list of Protected Payment System Banks, please refer to: [http://www.lchclearnet.com/risk\\_management/ltd/pps/](http://www.lchclearnet.com/risk_management/ltd/pps/)

|   |  |
|---|--|
| 2.4 In the event of a failure of your nominated PPS bank(s) what contingency arrangements does the applicant have in place to ensure continuity of margin payments? |  |
| <b>Contingency arrangements:</b>  | <b>Please specify below:</b>   |
| Applicant has a relationship with an alternative bank from which funds can be transferred directly to LCH.Clearnet Limited.   | <i>E.g. Clearing Member has an alternative arrangement in place with XXX bank. Account numbers are not required.</i> |
| Applicant has nominated different PPS banks for UK and US arrangements and/or currencies.   | <i>E.g. Clearing Member has a EUR account with XXX bank and a GBP account with XXX bank.</i>                         |
| Applicant can increase lodgement of non-cash collateral.  |  |
| Other.  |  |

### 3. REGULATION

|  |
|--|
| 3.1 Is the applicant regulated?<br><br>YES/NO**<br><br>If "yes" state the following: |
| Name of Primary Regulator:   |
| Contact Name and Telephone Number:   |
| Date Elected / Applied:**  |

|  |
|--|
| 3.2 Name of Other Regulator (if applicable). |
| Contact Name and Telephone Number:           |
| Date Elected / Applied:**                    |

\*\* Delete or state as appropriate

#### 4. GROUP STRUCTURE

4.1 Is the applicant a part of a group of companies?

YES / NO\*\*

If "yes" provide a separate "Corporate Tree" covering the whole group showing percentage sizes of holdings.

If "no" proceed to section 4.3.

\*\* Delete or state as appropriate

4.2 Please give details of the applicant's ultimate parent company, together with a copy of the company's latest audited accounts (attach additional pages if necessary).

Name of ultimate parent company:

Date and place of incorporation:

Principal activities:

4.3 Please give details of each major shareholder / partner, not identified in the previous section, who has 10% or more of the registered share / partnership capital, together with a copy of each shareholder's / partner's latest audited accounts (if applicable):

## 5. KEY OFFICERS / CONTACTS

|   |       |                      |
|---|-------|----------------------|
| 5.1 Please provide details of all key senior personnel and a summary of career history.   |       |                      |
| <b>Chairman</b>   | Name: | Date of Appointment: |
| Summary of career history:  |       |                      |
| <b>Chief Executive/<br/>Managing Director/<br/>Senior Partner</b> (Delete as appropriate) | Name: | Date of Appointment: |
| Summary of career history:  |       |                      |
| <b>Company Secretary</b>  | Name: | Date of Appointment: |
| Summary of career history:  |       |                      |
| <b>Compliance Officer</b>   | Name: | Date of Appointment: |
| Summary of career history:  |       |                      |
| <b>Head of Operations</b>   | Name: | Date of Appointment: |
| Summary of career history:  |       |                      |
| <b>Head of Risk Management</b>  | Name: | Date of Appointment: |
| Summary of career history:  |       |                      |

## 6. PROPOSED CLEARING ACTIVITY

6.1 State mnemonic and category which the applicant proposes to use in connection with its cleared business, below.

| Market   | Mnemonic* | Category** |
|--|-----------|------------|
| HKMEx  |           |            |
| London Metal Exchange  |           |            |
| Nodal Exchange   |           |            |
| <b>NYSE Liffe</b> – please tick which NYSE Liffe trading subscriptions you are applying to clear:<br>Financials <input type="checkbox"/><br>Equities <input type="checkbox"/><br>Commodities <input type="checkbox"/><br>BClear <input type="checkbox"/> |           |            |
| Turquoise Derivatives  |           |            |
| LCH EnClear OTC Services: Emissions (including Spot Emissions and Forward Emissions)   |           |            |
| LCH EnClear OTC Services: Freight (including Containers), Coal, Steel, Iron Ore & Fertilizer   |           |            |
| EquityClear – BATS Europe Ltd  |           |            |
| EquityClear – Chi-East   |           |            |
| EquityClear – Chi-X Europe   |           |            |
| EquityClear - Equiduct   |           |            |
| EquityClear – GETCO  |           |            |
| EquityClear - LMAX   |           |            |
| <b>EquityClear - London Stock Exchange</b><br>SETS Business <input type="checkbox"/><br>and/or<br>IOB Business <input type="checkbox"/>  |           |            |
| EquityClear - SIX Swiss  |           |            |
| RepoClear  |           |            |

| Market                                | Mnemonic* | Category** |
|---------------------------------------|-----------|------------|
| SwapClear – SwapClear Clearing Member |           |            |
| SwapClear – FCM Clearing Member***    |           |            |

\* Please select a mnemonic which is a unique 3-letter code which identifies each Clearing Member to the Clearing House.

\*\* Please refer to the Section 1.9.1 of the Clearing House Procedures for details of the Categories of Clearing Member status [http://www.lchclearnet.com/Images/Section%201%20-%20Clearing%20Member.%20Dealer.%20EquityClear%20and%20Turquoise%20Derivatives%20NCMs\\_tcm6-57514.pdf](http://www.lchclearnet.com/Images/Section%201%20-%20Clearing%20Member.%20Dealer.%20EquityClear%20and%20Turquoise%20Derivatives%20NCMs_tcm6-57514.pdf)

\*\*\* Please refer to the FCM Rulebook for details of FCM Clearing Member Status [http://www.lchclearnet.com/Images/FCM%20Regulations\\_tcm6-57089.pdf](http://www.lchclearnet.com/Images/FCM%20Regulations_tcm6-57089.pdf)

## 7. OTHER MEMBERSHIPS

7.1 Please give details of any membership(s) currently held by the applicant or any group company / companies in any exchange(s) and / or clearing house(s). State the name of the company holding the membership(s), the type of membership(s) held and the date of election / application (attach additional pages if necessary).

| Company Name | Name of Exchange / Clearing House | Type of Membership | Date of Election / Application |
|--------------|-----------------------------------|--------------------|--------------------------------|
|              |                                   |                    |                                |
|              |                                   |                    |                                |
|              |                                   |                    |                                |
|              |                                   |                    |                                |
|              |                                   |                    |                                |
|              |                                   |                    |                                |

## 8. ADDITIONAL INFORMATION

The applicant should answer all of the following questions by ticking YES or NO as appropriate. If “yes”, supply full details on a separate page.

|      |   | YES | NO |
|------|---|-----|----|
| 8.1  | Has a petition for the bankruptcy or compulsory winding-up or equivalent insolvency event of the applicant been presented in any jurisdiction at any time in the previous ten years?  |     |    |
| 8.2  | Is the applicant aware that any such petition is pending?   |     |    |
| 8.3  | Has any subsidiary of the applicant been compulsorily wound up or equivalent insolvency event in any jurisdiction at any time in the previous ten years?  |     |    |
| 8.4  | Has the applicant, at any time in the previous ten years in any jurisdiction, had a receiver or administrator (or overseas equivalent) appointed, failed to satisfy a judgment debt or a debt in respect of which a decree has been made against it, or come to a compromise or similar arrangement with its creditors?   |     |    |
| 8.5  | Has the applicant, at any time in the previous ten years, been refused or had revoked authorisation, recognition or any licence by, or membership of: <ul style="list-style-type: none"> <li>a) any organisation or body currently recognised or designated under the Financial Services and Markets Act 2000, or</li> <li>b) the Bank of England</li> </ul>                |     |    |
| 8.6  | Has the applicant at anytime decided after making an application to such a body or organisation not to proceed with it?   |     |    |
| 8.7  | Has the applicant in that time been refused or had revoked any analogous authorisation or membership outside the United Kingdom or decided after making an application for such authorisation or membership not to proceed with it?   |     |    |
| 8.8  | Has the applicant, at any time in the previous ten years, been subject to any disciplinary penalties imposed on it by any body of which it is a member of by any other regulatory body?   |     |    |
| 8.9  | Has the applicant, at any time in the previous ten years, been subject to any regulatory related investigation?   |     |    |
| 8.10 | Have the applicant's affairs, at any time in the previous ten years, been investigated by any body of which it is or was a member or by any other regulatory body in relation to its investment business, banking or deposit-taking activities, excepting investigations conducted in the course of normal monitoring and surveillance procedures with no adverse findings? |     |    |
| 8.11 | Has the applicant, at any time in the previous ten years, been subject to any investigation under The Companies Act 1948, The Companies Act 1985, The Companies Act (Northern Ireland) 1960 or The  |     |    |

|      |   | YES | NO |
|------|---|-----|----|
|      | Companies (Northern Ireland) Order 1986 or any similar law outside the United Kingdom?  |     |    |
| 8.12 | In relation to the above, are any such investigations in progress?  |     |    |
| 8.13 | Have the applicant's books and records been requisitioned or seized, in the previous ten years, by any regulatory body?   |     |    |
| 8.15 | Have any legal proceedings been successfully brought against the applicant in relation to its investment business, banking or deposit-taking in the UK in the previous ten years? |     |    |
| 8.16 | Is the applicant involved in any such proceedings at the time of the application?   |     |    |
| 8.17 | Has the applicant ever been convicted of any offence involving fraud or other dishonesty?   |     |    |
| 8.18 | Have any steps been taken with regard to the applicant, in the previous ten years, under the default rules of an investment exchange or clearing house?                           |     |    |
| 8.19 | Is the applicant aware of any other information that may be material to this application and should be disclosed prior to consideration for Clearing Member Status?               |     |    |

## 9. DECLARATION

We declare that the information supplied is complete and we agree that the applicant will comply with and be bound by the Clearing House Rulebook and Clearing Membership Agreement which are or may be in force from time to time. We undertake to notify the Clearing House immediately of any material changes in the information provided in this application form which occur after the date of submission of the application and prior to receiving notification of the Clearing House's decision.

We understand that any information provided on this form or otherwise in connection with our application for Clearing Member Status may be disclosed by the Clearing House to group companies, to any exchange, governmental department, regulatory organisation or other authority, or to the Clearing House's insurers in connection with any form of insurance, or to any person pursuant to the provision of the Financial Services and Markets Act 2000 and any rules made thereunder, or in accordance with any other statutory requirement. We further agree and understand that the Clearing House may, in connection with our application, disclose general details of our company, its ownership and personnel to existing Clearing Members of the Clearing House.

We agree, subject to the Clearing House approving our application, to deposit a Contribution to the Default Fund on the terms and conditions set out in the Default Fund Rules and subject to the Clearing House Rulebook.

For and on behalf of

**(Name of Applicant Firm)**

**Two signatures are required below:**



**Authorised Signatory**

**Authorised Signatory**



**Name in block letters**

**Name in block letters**



**Position**

**Position**



**Date**

**Date**