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| **LCH SA**  Application for  **SECURITIES MARKETS**  *An on-boarding summary table containing the required documents is available upon request to Membership* |

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| **Applicant / Clearing Member Name** |  |

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| **Registered Office address** | | | | | |
| Address |  | | | | |
| Postal code |  | City |  | Country |  |
| Membership Contact |  | | | | |
| Telephone |  | | | Fax |  |
| Email |  | | | | |

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| *The Applicant fills in the following if its back-office is in another location than its registered office address.* |

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| **Back office operations location** | | | | | |
| Address |  | | | | |
| Postal code |  | City |  | Country |  |
| Membership Contact |  | | | | |
| Telephone |  | | | Fax |  |
| Email |  | | | | |

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| *If the form does not provide sufficient space, please use a separate sheet for the remaining information.*  *Where applicable the terms used in this admission application shall have the meaning assigned to them in the Clearing Rule Book, the latest version of which can be found on LCH’s website (*[*www.lch.com*](http://www.lch.com)*).* |

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| **LCH SA**  Membership Department  Le Centorial  18, rue du Quatre Septembre  75002 PARIS  🖀 +33 (0)1 70 37 67 60  membership.fr@lch.com |

**Updated April, 2016**

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| **1.** **DETAILS OF SECURITIES MARKETS APPLICATION** |

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|  | **Market Place** | | **ICM** | **GCM** | **Planned go-live date** |
| **SECURITIES** | **Euronext Securities** | Paris |  |  |  |
| Brussels |  |  |  |
| Amsterdam |  |  |  |
| Lisbon |  |  |  |
| **Bourse de Luxembourg** | |  |  |  |
| **Börse-Berlin Equiduct** | Paris |  |  |  |
| Brussels |  |  |  |
| Amsterdam |  |  |  |
| Lisbon |  |  |  |
| **Euronext London** | |  |  |  |
| **BondMatch™** | |  |  |  |
| **Galaxy™** | |  |  |  |

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| **2. MEMBERSHIP** |

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| **Business description of the Applicant / Clearing Member (activities and motivations)** |
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| **For General Clearing Member** |
| The number of Trading Members for whom clearing will be performed and their statutory name: |
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* ***The Applicant is already Clearing Member at LCH SA and will keep its existing payment solution*** *(Please do not fill in sections 3 & 4).*
* ***The Applicant is not Clearing Member at LCH SA*** *(Please fill in sections 3 & 4)****.***
* ***The Applicant wants another payment solution for this extension*** *(Please fill in sections 3 & 4)****.***

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| **3.** **PAYMENT OF COLLATERAL AND CLEARING FUND CONTRIBUTION** |

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| **SECURITIES MARKETS (All selected markets)** | | | |
| **Payment** | **Directly** | **Indirectly** | **Information** |
| Collateral in Euro 🞎  NBB offer\* 🞎  DNB offer\*\* 🞎 | 🞎 | 🞎 | Central bank’s name : |
| Test BIC code*\*\*\**: |
| Production BIC code*\*\*\**: |
| If indirect, please indicate the Payment Agent or the Collateral Provider : |

*\* National Bank of Belgium’s offer \*\* Dutch National Bank’s offer \*\*\* If the Applicant does not know yet, information can be provided later in the admission process.*

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| 🛈 *If the Applicant uses different accounts, please duplicate the table above and indicate the market by replacing “All selected markets” with its name. Then, fill in the information accordingly.* |

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| **4. CASH PAYMENT** |

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| *For penalties on non-settlements, any fees due to LCH (trading fees, clearing fees, delivery fees) IPU dividends.* |

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| **SECURITIES MARKETS (All selected markets)** | | | |
| **Payment** | **Directly** | **Indirectly** | **Information** |
| Central bank name: | 🞎 | 🞎 | Test BIC code\*\*\* : |
| Production BIC code\*\*\* : |
| If indirect, please indicate the Payment Agent: |

*\*\*\* If the Applicant does not know yet, information can be provided later in the admission process.*

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| 🛈 *If the Applicant uses different accounts, please duplicate the table above and indicate the market by replacing “All selected markets” with its name. Then, fill in the information accordingly.* |

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| **5.** **DELIVERY AND SETTLEMENT** |

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| *The following forms will be completed by the Applicant if it already has the information available. The instructions are as follows:*  *(1) In the “Access” column, the Applicant might circle “D” if it has its own direct account in the CSD or “SA” if it is going through a settlement agent.*  *Abbreviations used below mean: EB = Euroclear Bank; ENL =Euroclear Netherland; EBe = Euroclear Belgium; EF = Euroclear France* |

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| **5.1. Euronext Securities** |

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| **Euronext Securities Amsterdam** | | | | |
| **Settlement Place** | **Access(1)** | | **Name of Settlement Agent** | **CSD / ICSD** |
| Amsterdam | D | SA |  | **ENL ❑ EB ❑** |
| Brussels | D | SA |  | **EBe ❑ EB ❑** |
| Paris | D | SA |  | **EF ❑ EB ❑** |
| **Foreign Currency** | D | SA |  | Euroclear Bank |

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| **Euronext Securities Brussels** | | | | |
| **Settlement Place** | **Access(1)** | | **Name of Settlement Agent** | **CSD / ICSD** |
| Brussels | D | SA |  | EBe ❑ EB ❑ |
| Paris | D | SA |  | EF ❑ EB ❑ |
| Amsterdam | D | SA |  | ENL ❑ EB ❑ |
| **OLO** account(s) in BNB | D | SA |  | BNB |
| **Foreign Currency** | D | SA |  | Euroclear Bank |

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| **Euronext Securities Paris** | | | | |
| **Settlement Place** | **Access(1)** | | **Name of Settlement Agent** | **CSD / ICSD** |
| Paris | D | SA |  | EF ❑ EB ❑ |
| Brussels | D | SA |  | EBe ❑ EB ❑ |
| Amsterdam | D | SA |  | ENL ❑ EB ❑ |
| **Foreign Currency** | D | SA |  | Euroclear Bank |

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| **Euronext Securities Lisbon** | | | | |
| **Settlement Place** | **Access(1)** | | **Name of Settlement Agent** | **CSD / ICSD** |
| Lisbon | D | SA |  | InterBolsa |

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| **5.2. Bourse de Luxembourg** |

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| **Bourse de Luxembourg** | | | | |
| **Settlement Place** | **Access(1)** | | **Name of Settlement Agent** | **CSD / ICSD** |
| Luxembourg | D | SA |  | Clearstream ❑ EB ❑ |

To allow the CSD performing the Cash movements it is necessary to include your BIC codes in the instructions which will be sent to Euroclear Bank / Clearstream (mandatory data to generate money transfer messages):

|  |  |  |
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| **CSD / ICSD** | **BIC code Test** | **BIC code Production** |
| **Euroclear Bank** |  |  |
| **Clearstream** |  |  |

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| **5.3. Börse Berlin Equiduct** |

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| *Please note that the settlement solution on the Euronext markets cannot be different than the Börse-Berlin Equiduct one, unless the Applicant uses a different code.* |

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| **Equiduct Amsterdam** | | | | |
| **Settlement Place** | **Access(1)** | | **Name of Settlement Agent** | **CSD / ICSD** |
| Amsterdam | D | SA |  | ENL ❑ EB ❑ |
| Brussels | D | SA |  | EBe ❑ EB ❑ |
| Paris | D | SA |  | EF ❑ EB ❑ |

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| **Equiduct Brussels** | | | | |
| **Settlement Place** | **Access(1)** | | **Name of Settlement Agent** | **CSD / ICSD** |
| Brussels | D | SA |  | EBe ❑ EB ❑ |
| Amsterdam | D | SA |  | ENL ❑ EB ❑ |
| Paris | D | SA |  | EF ❑ EB ❑ |

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| **Equiduct Paris** | | | | |
| **Settlement Place** | **Access(1)** | | **Name of Settlement Agent** | **CSD / ICSD** |
| Paris | D | SA |  | EF ❑ EB ❑ |
| Brussels | D | SA |  | EBe ❑ EB ❑ |
| Amsterdam | D | SA |  | ENL ❑ EB ❑ |

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| **Equiduct Lisbon** | | | | |
| **Settlement Place** | **Access(1)** | | **Name of Settlement Agent** | **CSD / ICSD** |
| Lisbon | D | SA |  | InterBolsa |
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| **5.4. Euronext London** | | | | |

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| **Euronext London** | | | | |
| **Settlement Place** | **Access(1)** | | **Name of Settlement Agent** | **CSD / ICSD** |
| Paris | D | SA |  | EF ❑ EB ❑ |
| Brussels | D | SA |  | EBe ❑ EB ❑ |
| Amsterdam | D | SA |  | ENL ❑ EB ❑ |
| **Foreign Currency** | D | SA |  | Euroclear Bank |

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| **5.5. BondMatch™** |

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| **BondMatch™** | | | | |
| **Settlement Place** | **Access(1)** | | **Name of Settlement Agent** | **CSD / ICSD** |
| Paris | D | SA |  | EF ❑ EB ❑ |
| Brussels | D | SA |  | Euroclear Bank |
| Amsterdam | D | SA |  | ENL ❑ EB ❑ |
| Lisbon | D | SA |  | InterBolsa |

*In case of non euro currency, settlement instructions will be automatically sent to the Euroclear Bank account.*

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| **5.6. Galaxy™** |

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| **Galaxy™** | | | | |
| **Settlement Place** | **Access(1)** | | **Name of Settlement Agent** | **CSD / ICSD** |
| Paris | D | SA |  | EF ❑ EB ❑ |
| Brussels | D | SA |  | Euroclear Bank |
| Amsterdam | D | SA |  | ENL ❑ EB ❑ |
| Lisbon | D | SA |  | InterBolsa |

*In case of non euro currency, settlement instructions will be automatically sent to the Euroclear Bank account.*

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| **6. INTERNAL ORGANISATION** |

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| **6.1. Contact information** | | | | | |
| *LCH must be able to contact the right person at the right time in order to provide the best service. Therefore, please confirm that the following forms are correctly pre-filled and fill them-in if they are empty or not accurate. If necessary do not hesitate to add more contacts potentially needed by the LCH internal services, or to modify some fields if necessary.* | | | | | |
| **Back Office Head (Securities)** | | | | | |
| Job title |  | | | | |
| Mr. / Ms. | First Name |  | Last Name |  | |
| Telephone |  | | Fax |  | |
| Email |  | | Address | (2) | |
| Tick the box to include this contact to the *Operational Information Securities* list. | | | | |  |
| **Deputy** | | | | | |
| Job title |  | | | | |
| Mr. / Ms. | First Name |  | Last Name |  | |
| Telephone |  | | Fax |  | |
| Email |  | | Address | (2) | |
| Tick the box to include this contact to the *Operational Information Securities* list. | | | | |  |

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| **Collateral department (Responsible for deposits and collateral withdrawal: currencies and securities)** | | | | | |
| Job title |  | | | | |
| Mr. / Ms. | First Name |  | Last Name |  | |
| Telephone |  | | Fax |  | |
| Email |  | | Address | (1) | |
| Tick the box to include this contact to the *Treasury Information* list. | | | | |  |
| **Deputy** | | | | | |
| Job title |  | | | | |
| Mr. / Ms. | First Name |  | Last Name |  | |
| Telephone |  | | Fax |  | |
| Email |  | | Address | (1) | |
| Tick the box to include this contact to the *Treasury Information* list. | | | | |  |

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| **Settlement / fail & Buy-in contact** | | | | | |
| Job title |  | | | | |
| Mr. / Ms. | First Name |  | Last Name |  | |
| Telephone |  | | Fax |  | |
| Email |  | | Address | (2) | |
| Tick the box to include this contact to the *Operational Information Securities* list. | | | | |  |
| **Deputy** | | | | | |
| Job title |  | | | | |
| Mr. / Ms. | First Name |  | Last Name |  | |
| Telephone |  | | Fax |  | |
| Email |  | | Address | (2) | |
| Tick the box to include this contact to the *Operational Information Securities* list. | | | | |  |

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| **CTH Contact (Customer Technical Help Desk)** | | | | | |
| Job title |  | | | | |
| Mr. / Ms. | First Name |  | Last Name |  | |
| Telephone |  | | Fax |  | |
| Email |  | | Address | (1) | |
| Tick the box to include this contact to the *Operational Information Securities* list. | | | | |  |
| **Deputy** | | | | | |
| Job title |  | | | | |
| Mr. / Ms. | First Name |  | Last Name |  | |
| Telephone |  | | Fax |  | |
| Email |  | | | | |
| Tick the box to include this contact to the *Operational Information Securities* list. | | | | |  |

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| **7. REPRESENTATION** |

**I** \_\_\_\_\_\_\_\_\_\_\_(name and Title)  **hereby attest the accuracy of the information included in this document.**

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| --- | --- |
| Place | Date |
|  |  |
| Represented by | |
|  | |
| Title / Duties | |
|  | |
| Signature | |
|  | |