

Please return the completed form to fax nr. +31 20 550 5101

Application Form for Competitive Market Maker at Liffe Brussels

The undersigned,

Name _____

Member _____

Address _____

Member Mne. _____ Phone nr. _____

hereinafter “the Applicant”,

in its capacity as Trader at Liffe Brussels hereby applies for a position as Competitive Market Maker (CMM) in the Liffe Class Combination (ECC):

The applicant is willing and able to fulfil the obligations of a CMM as set out for the concerning ECC/Classes and to sign the agreement in which the rights and obligations of a CMM are laid down. The applicant is also aware that a CMM should maintain a double-sided market in the class BXO.

The Applicant has consulted its Clearing Member,

Name _____

Address _____

Telephone nr _____

who fully supports this application. In witness of approval of the application this form bears the countersignature of the abovementioned Clearing Member.

Place, _____

Date, _____

On behalf of the Applicant,

On behalf of the Applicant’s Clearing Member
