

NEX EXCHANGE MEMBERSHIP APPLICATION FORM

Applicants seeking Membership should complete the form and send to NEX Exchange by email to: businessdevelopment@nexexchange.com If you require assistance, please contact the membership team on +44 (0) 20 7818 9774.

Words not defined in this Application Form will have the meanings ascribed to them in the NEX Exchange Member Terms and Conditions, as amended, supplemented or appended from time to time and published by NEX Exchange on the NEX Exchange Site (the "Terms and Conditions")

APPLICATION/MEMBER FIRM DETAILS

Full name of the legal entity applying for membership (the "Application" or "Member" if approved for Membership, as applicable):

Company Number:

Company / Partnership / Other (please specify):

Type of legal entity:

Jurisdiction of incorporation:

Registered Office Address:

Name of Applicant's home competent authority and details of where its scope of regulatory permissions is available for inspection, such as an electronic register:

NEX Exchange offers Members a choice of trading services facilitating their on-exchange activities in listed and unlisted securities. Please select the category of membership you wish to apply for:

Market Making:

Quotation and trade reporting services

Broker Dealer:

Trading with market makers and, if also trading
With non-market makers, submitting trade reports
In relation to on-exchange transactions permitted
By the Rules

CONTACT DETAILS

PRINCIPAL AND SECONDARY CONTACTS

The Applicant is required to: (i) provide contact details for each of the roles below and (ii) select one of the listed contacts as its principal contact and another as a secondary contact. These persons should be available to respond promptly to queries raised by NEX Exchange and will also be the recipients of Market Notices and other communications from NEX Exchange:

Market maker/broker dealer contact:

Principal Contact Secondary Contact

Name:	<input type="text"/>
Job Title:	<input type="text"/>
Telephone:	<input type="text"/>
Email:	<input type="text"/>

Compliance Contact:

Name:	<input type="text"/>
Job Title:	<input type="text"/>
Telephone:	<input type="text"/>
Email:	<input type="text"/>

Systems/IT contact:

Name:	<input type="text"/>
Job Title:	<input type="text"/>
Telephone:	<input type="text"/>
Email:	<input type="text"/>

Finance Department contact:

Name:	<input type="text"/>		
Job Title:	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone:	<input type="text"/>		
Email:	<input type="text"/>		

Settlement contact:

Name:	<input type="text"/>		
Job Title:	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone:	<input type="text"/>		
Email:	<input type="text"/>		

Operations contact:

Name:	<input type="text"/>		
Job Title:	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone:	<input type="text"/>		
Email:	<input type="text"/>		

TRADING, CLEARING AND SETTLEMENT DETAILS

Firm ID	Mnemonic	Legal Entity	SDRT** (Y/N)	Trading Capacity (Agency or Principal)	CREST Code***

The submission of quotes and trade reports to NEX Exchange must conform to the NEX Exchange Technical Specification. Please provide details of how the Applicant intends to connect to NEX Exchange:

For Applicants that are not market makers in one or more NEX Exchange securities: Does the Applicant wish to make arrangements to trade report to NEX Exchange, either directly to NEX Exchange or via an Accredited Software Provider, in order to facilitate on-Exchange business with non-market makers (e.g. agency crosses)?

* Please list all identifying codes that the Applicant is proposing to use in relation to business conducted on NEX Exchange and the capacity in which they will be used. These will usually be BIC codes. If the Applicant is currently trading on another UK exchange, these should be the same as the member identifiers used on that exchange.

** Stamp Duty Reserve Tax: Please confirm whether the Applicant will claim intermediary status and relief from UK stamp duty? (Y/N)

*** Please provide details of all the clearing and settlement codes that the Applicant or any agent acting on its behalf will be using in relation to transactions on NEX Exchange.

APPLICANT DECLARATION

1. The applicant hereby applies for Membership and confirms that the information contained in this Application Form or otherwise provided to NEX Exchange is true, complete and accurate.
2. The Applicant agrees to inform NEX Exchange in the event that it wishes to amend its business profile in relation to its activities on NEX Exchange
3. The Applicant acknowledges that it has read and understood the Terms and Conditions and agrees to abide by the Terms and Conditions and Rules on a continuing basis.
4. The Applicant agrees to pay the Fees as are from time to time specified by NEX Exchange in the NEX Exchange Member Fee Schedule as amended, supplemented or appended from time to time and published by NEX Exchange on the NEX Exchange Site.

This declaration must be signed by a Director/Partner of the Applicant for and on behalf of the Applicant:

Signature: _____

Name: _____

Position: _____

Date: _____