



Mercantile Exchange Nepal Limited
— Where the Nation Trades —
AN ISO 9001:2008 CERTIFIED EXCHANGE

SUB BROKER REGISTRATION FORM

Name of Broker: _____
Sub Broker Code: _____ [To be filled by Clearing Member]

For Individual Only

Full Name: _____
[First Name] [Middle Name] [Last Name]
Date of Birth: ____ dd/ ____ mm/ ____ yyyy Age: _____ Citizenship/Passport No.: _____
Permanent Address: _____ City: _____
Temporary Address: _____ City: _____
Country: _____ Nationality: _____
Permanent Account No.: _____ E-mail: _____

Please affix a recent
photograph in light
background of the
applicant/signatory
and sign on the
photograph

For Institution Only

Name: _____
Date of Incorporation: _____ Registered Office Address: _____
City: _____ E-mail: _____
Name of Proprietor/Managing Director/Chairman/Chief Executive Officer: _____
Name of Authorised Person: _____

Declaration

- a) Whether any court case is pending against the applicant? [] Yes [] No
b) Whether the applicant is involved in any financial irregularities and subject to any disciplinary proceedings? [] Yes [] No
c) Whether the applicant was subject to any disciplinary proceedings in any other exchange? [] Yes [] No
d) Whether the applicant has read, understood and fully aware of the terms and conditions of the agreement with Broker/CM? [] Yes [] No

(If answer is yes in clause (a) and (b) above, please furnish the details of such financial irregularities and/or disciplinary action in a separate sheet)

I/We hereby declare that the information furnished in this application is true and correct and the documents annexed with this are true copies of its original. I/We undertake to inform the Broker/ Clearing Member [CM], in writing, immediately of any changes in the information furnished by me/us in this application. The Broker/ CM/ Exchange will not be liable for any loss or damages or any other consequences arising on account of non intimation of changes in the above information.

I/We have read and understood the contents of the Risk Disclosure Document and terms and conditions of the agreement with broker/CM and agree to abide by the same and also undertake to abide by the Bye-Laws and Rules of the Exchange.

Applicant's Signature: _____ (Seal, if Institution) Date: ____ dd/ ____ mm/ ____ yyyy

Documents To Be Submitted Along With The Sub-Broker Registration Form

- ☐ Proof of Identity & Address ☐ Resolution for Registration & Authorized Signatory (If institution)
☐ Certificate / transcript of Bachelors degree or proof of trading experience (If any)

Broker Verification

Name of Broker: _____ Date: _____
Authorized Person's Name: _____
Authorized Signature: _____ Seal: _____

Clearing Member Verification

Name of CM: _____ Date: _____
Authorized Person's Name: _____
Authorized Signature: _____ Seal: _____