



Mercantile Exchange Nepal Limited

Where the Nation Trades

AN ISO 9001:2008 CERTIFIED EXCHANGE

Mercantile Exchange Nepal Limited

Clearing/Market Maker Membership Form

For Office Use Only

Registration Number :

Registered Office :

Fax :

Email :

A recent photograph
in light background
of the signatory

Please affix and sign
on the photograph

CATEGORY

CLEARING MEMBER []

MARKET MAKER []

Mercantile Exchange Nepal Limited

Dear Sir,

I/We request you to register _____ (Name of the company)

as a **Clearing Member/ Market Maker** of the Mercantile Exchange Nepal Limited. Our details required for registration are as follows:

DETAILS OF FEE DEPOSITED

Amount _____ Draft No /Deposit Voucher No. _____

Bank _____ Date _____

TO BE FILLED BY INSTITUTION ONLY

Name _____

Date of Incorporation/Registration _____ [DD/MM/YYYY]

Registered Office Address

City _____ V.D.C./Municipal _____

Ward No: _____ Street/ Block _____

Telephone _____ Fax _____

Website _____ Email _____

Address for communication (if different from the above)

City _____ V.D.C./Municipal _____

Ward No: _____ Street/ Block _____

Telephone _____ Fax _____

Website _____ Email _____

Name of the authorized person _____

Name of the chairman/Managing Partner/Proprietor and Directors/Partners

TO BE FILLED BY APPLICANTS

Name of other Exchange(s) in which the applicant is/was a member

Name of other Exchange(s) in which any of the director/partner/proprietor is/was a member

PAN

Permanent Account No.: _____

Net Worth of the Applicant _____ as on _____

Details of Bank Account

Name of Bank: _____ Branch _____

Account No. _____ Account Type _____

DECLARATIONS

a) Whether any court case is pending against the applicant or directors/promoters of the applicant?

☐ YES/ ☐ NO

b) Whether the applicant or the directors/promoters of the applicant is involved in any financial irregularities and subject to any disciplinary proceedings?

☐ YES/ ☐ NO

c) Whether the applicant or directors/promoters of the applicant were subject to any disciplinary proceedings in any other exchange ?

☐ 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)

We hereby declare that the information furnished in this application is true and correct and the documents annexed with this application are true copies of its original. We undertake to inform the Exchange, in writing, immediately of any changes in the information furnished by us in this application. The Exchange will not be liable for any direct/indirect consequences arising on account of non intimation changes in the above information.

I/We agree to abide by the Bye-Laws and Rules of the Exchange.

Signature of Applicant /Authorized Representation

Place: _____

Date: _____

(Institutional Seal)

For Office Purpose:

Clearing Member Code: _____ Marker Maker Code: _____

Verified by: _____ Authorized by: _____ (Name)

DOCUMENTS TO BE SUBMITTED ALONG WITH APPLICATION

1. [] Bio-data of the applicant or directors/ partners/authorized representative along with photo.
2. [] Letter of Undertaking
3. [] Financial Credibility Certificate [FCC] provided by bank on current account.
4. [] Proof of identity- copy of citizenship/passport/driving license.(self certified)
5. [] Proof of address-utility bill/rental agreement(self certified)
6. [] List of directors certified by Co Sec./Notary Public/Registered Auditor
7. [] Copy of latest filed tax return
8. [] Copy of MOA & AOA
9. [] Resolution Authorizing the Institution to apply for membership, execution of MEX-CM agreement / MEX-MM agreement and authorized signatory
10. [] Letter Authorizing the authorized person
11. [] PAN/VAT Certificate copy-self certified
12. [] Net Worth Certificate issued by a Registered Auditor/CA
13. [] Company Registration Certificate
14. [] Specimen of Signature and Seal