

1.1 Applicant							
Name of the company according to company register							
Address							
1.2 Contact person							
Surname		First Name					
Telephone	Fax		E-Mail				
Clearing Member ID BIC of Clearing Member (11-digits)							
Set-up effective	(DDMM	/YYYY))				
Deletion effective (DDMMYYYY) (after closure of business)							
Change effective(DDMMYYYY) (after closure of business)							

We confirm that the following settlement accounts (see 1.3) for foreign currency payments have been set up and activated at our correspondent bank. We wish to use the accounts as settlement accounts for the settlement of payments in the respective currency. We agree that fees in foreign currencies may also be withdrawn by European Commodity Clearing AG from the settlement accounts mentioned in section 1.3 of this form.

The applicant has granted a debit authorization in favor of ECC (BIC: EEXCDE8LXXX) for each settlement account held with the respective correspondent bank.

We agree that ECC will conduct at least two test payments for each settlement account (Debit / Credit) before activating the settlement accounts at ECC.

We acknowledge that ECC reserves the right to forward any transaction fee to the applicant which might be invoiced to ECC by the respective correspondent bank.

ECC requires this form filled in and signed by authorized company representatives 4 weeks before the intended changes.

1.3 Account Details

Currency	GBP	USD
Name of account holder ¹		
BIC of account holder (11-digits)		
Name of correspondent bank ²		
BIC of correspondent bank (11-digits)		
Account number with correspondent bank		
Sort Code		(Code not requested)

Currency	JPY
Name of account holder ¹	
BIC of account holder (11-digits)	
Name of correspondent bank ²	
BIC of correspondent bank (11-digits)	
Account number with correspondent bank	

¹ In case of variant account holder/owner a special Power of Attorney / debit authorization will be necessary.

² The list of available correspondent banks can be found on ECCs website.

1.4 Signatures

DATA PROTECTION DECLARATION

The undersigned assures that he has fully informed the contact persons named in connection with the contract, the exchange membership relationship or other legal relationships about the transfer of their personal data and that he has brought to their attention the DATA PROTECTION DECLARATION which can be found on our company websites.

Place	Date	Company stamp and authorized signature (name in capital letters)
Place	Date	If required: Company stamp and 2 nd authorized signature (name in capital letters)