**Application for Clearing Account[[1]](#footnote-1)**

 Date:Click or tap to enter a date.

 **To:**

 **EnEx Member Support**

 110, Athinon Ave. 104 42 Athens, Greece

Tel: (+30) 210 33 66 845

 E-mail: EnEx-Member-Support@enexgroup.gr

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| **General Information** |
| Clearing Member’s Name: | Click or tap here to enter text. |
| Clearing Member’s Capacity: |  Choose an item. |
| Clearing Member’s EMCS Code: | Click or tap here to enter text. |
| Contact Person Details (e-mail, tel.): | Click or tap here to enter text. |
| **Clearing Space (DAM/IDM or Balancing)** |
| Please select the Clearing Space: Choose an item. |
| **Clearing Account Status (Act/Del/Mod)** |
| Please select the Clearing Account Status: Choose an item. Date: Click or tap to enter a date. |
| 1. **Direct Clearing Member - Own Clearing Account2**
 |
| EMCS Clearing Account Code:*Is only completed at Modification / Deactivation* | Click or tap here to enter text. |
| Energy Identification Code (EIC): | Click or tap here to enter text. |
| Participation Type in IPTO’s Balancing Market (BRP or BRP&BSP)*Filled only in case of Clearing Account related in Clearing Space of Balancing Market (CBSE)*  | Choose an item. |
| T2 Bank Account ΙΒΑΝ of the Direct Clearing Member: | Click or tap here to enter text. |
| 1. **General Clearing Member – Participant’s Clearing Account[[2]](#footnote-2)**
 |
| EMCS Clearing Account Code:*Is only completed at Modification / Deactivation* | Click or tap here to enter text. |
| Participant’s Αctivation Type in IPTO’s Balancing Market BRP or BRP&BSP)*Filled only in case of Clearing Account related in Clearing Space of Balancing Market (CBSE)*  | Choose an item. |
| Participant’s Name (Account’s Beneficiary) for which the General Clearing Member performs Clearing: | Click or tap here to enter text. |
| Participants’ Energy Identification Code (EIC): | Click or tap here to enter text. |
| Participant’s Contact Details (e-mail, tel): | Click or tap here to enter text. |
| T2 Bank Account ΙΒΑΝ of the General Clearing Member:*IBAN to be filled in by the General Clearing Member in Target2 for the Cash Settlement of the Day-Ahead & Intraday Market or Balancing Market* | Click or tap here to enter text. |
| Participant’s or General Clearing Member’s Bank Account ΙΒΑΝ[[3]](#footnote-3):*for any cash refunds in the event of default according to article 2.15 par.2 (viii) of EnExClear’s Rulebooks* | Click or tap here to enter text. |

**Notes**

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| Click or tap here to enter text. |

For the Clearing Member Click or tap here to enter text.

(Name of Legal Representative, Position, Signature)



(Company Stamp)

For the Participant Click or tap here to enter text.
(Name of Legal Representative, Position, Signature, Company Stamp)



(Company Stamp)

**ANNEX I : Participant’s Authorization for Self-Billing Procedure**

The Company under the name Click or tap here to enter text. *(full name and distinctive title)* having its legal seat in Click or tap here to enter text. *(address),* with Commercial Registry No Click or tap here to enter text., with VAT (*identification number & country*) Click or tap here to enter text., through its legal representative (*Authorized Signatory),* hereby irrevocably and for an unlimited time period authorizes EnExClear to issue all invoices for the Transactions in the HEnEx DAM & IDM Markets and/or for the Positions in the IPTO’s Balancing Market in accordance with the Self-Billing procedure of Article 8 par. 5 of L. 4308/2014 (Greek GAAP). The Company remains exclusively liable to ensure that the invoice is duly issued and remains exclusively liable towards its legal (accounting, legal, tax, VAT, reporting) obligations.

The Company hereby declares that all the information provided above (full name and distinctive title, legal seat, Commercial Registry No, VAT identification number & country) are accurate and up to date and commits to provide EnExClear with proof thereof as well as with any changes that may be effected in the future immediately and in any case prior to the issuance of an invoice by EnExClear through the Self-Billing procedure. Further, the Company hereby commits to provide EnExClear with all information necessary for the proper and accurate issuance of the invoice of its behalf.

The Company hereby declares that the e-mail address Click or tap here to enter text. should be used by EnExClear for the delivery of invoices issued through the self-billing procedure and for any communication between the parties regarding the self-billing procedure. The Company commits to communicate any change of the declared e-mail address to EnExClear immediately and without delay.

For the Participant Click or tap here to enter text.
(Name of Legal Representative, Position, Signature)



(Company Stamp)

1. *Please send a scanned copy of this form and the original hard copy, signed accordingly to EnEx Member Support* [↑](#footnote-ref-1)
2. *Direct Clearing Member and Participant consent to ANNEX I: Participant’s Authorization for Self-Billing Procedure*  [↑](#footnote-ref-2)
3. *If the* ***IBAN of the Participant is used****, a certificate from the bank is required to verify the IBAN of the account as well as the details of the Account’s Beneficiary* [↑](#footnote-ref-3)