#### Liquidity Provider Application Form

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| --- |
| Date:Click or tap to enter a date. |
| **General Info** |
| Trade name | :       |
| TIN[[1]](#footnote-1) | :       |
| OASIS ID *(if known)*: | :       |
| Contact Person | (name/tel./email) | :       |
|  |

|  |
| --- |
| **Natural Gas** |
|

|  |  |
| --- | --- |
| We have signed an outsourcing contract for Liquidity Provision : YES / NO |  |
| If yes, please fill in the following: |  |
| Company Name[[2]](#footnote-2):      |  |
| TIN:      |  |

**Supporting Documents** |
| Internal Regulation of Liquidity Provision (or ) | [ ]  |
| Organizational chart | [ ]  |
| Participant’s Profile Form regarding the Head and the responsible Liquidity Providers (Form F1-4) | [ ]  |
| If you have signed an outsourcing contract for Liquidity Provision : |
| 1. Outsourcing Policy for the Liquidity Provision Operation
 | [ ]  |
| 1. Risk Management Policy on outsourcing
 | [ ]  |
| **Assignment of Clearing *(for Non-Clearing Members only)***  |
| Assignment of clearing procedure to the GCM:      |

**Additional Documents**

|  |
| --- |
| Bank Account Certificate (IBAN) [ ]  |

**Notes**

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|       |

For the Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
(Name of Legal Representative, Position, Signature, Company Stamp)

1. *Tax Identification Number* [↑](#footnote-ref-1)
2. *Of the company you have signed the Liquidity Provision Outsourcing Contract with.* [↑](#footnote-ref-2)