



**Application for role as Liquidity Provider (ELPS VI)**

This is the application form for the ELPS VI selection procedure. Please complete the next page if you wish to apply for a role as Liquidity Provider role in ELPS VI. The form consists of two sections.

Section 1: This section is mandatory. Please note that the information you provide will be used for the selection procedure and that the persons mentioned must be available during the procedure.

Section 2: Use this section to indicate if you wish to apply for a PMM or CMM role.

**Please fax this form to our quality of derivative markets department in Amsterdam (+31 20 5504926) by 17.00 CET on 22 February 2010.**



**Application for role as Liquidity Provider (ELPS VI)**

**Section 1**

Company: -----  
Member mnemonic: -----  
Representative 1: -----  
Telephone number 1: -----  
Email address 1: -----  
Fax number: -----  
Representative 2: -----  
Telephone number 2: -----  
Email address 2: -----  
Clearing member: -----

**Section 2**

The above-mentioned member hereby applies for the position as<sup>1</sup>:

- ☐ PMM in the WAV ECC  
☐ CMM in the WAV ECC

\_\_\_\_\_  
Signature of authorised representative

\_\_\_\_\_  
Company name

Date: \_\_\_\_\_

\_\_\_\_\_  
<sup>1</sup> Please mark as applicable. If you mark both boxes (PMM and CMM) you will be included in the selection procedure for CMMs if you are not selected as a PMM.